meet minimum practice standards before registering and using the title of registered practitioner.

Major Issues

State policy makers continue to grapple with most of the same issues which were on the policy agenda in the early 1970's, although some issues, such as adding consumer representation to licensure boards, have had new solutions proposed and enacted. But with growing concern over burgeoning health care costs and incompetent practitioners, the issues have been reprioritized in the 1980's.

Incompetent Practitioner At the state and federal level, incompetent practitioners -- how to find them and how to deal with them -- has emerged as a number one priority for state legislators and regulators. Legislatures are providing increased funding for enforcement functions.

Practice acts are being amended to expand the disciplinary sanctions available to regulators beyond suspension and revocation. The most frequent additional sanctions include administrative fines, reprimand and probation.

State licensing boards are increasingly developing policies on dealing with practitioners who abuse drugs or alcohol, referring abusers to treatment programs for rehabilitation when possible, and tracking practitioners' successes and failures after treatment.

In May 1984, Sen. John Heinz introduced the Medicare and Medicaid Patient And Program Protection Act in the Senate which gives the U.S. Dept. of Health and Human Services greater powers to exclude fraudulent and incompetent health practitioners from Medicare and Medicaid. This bill would require state licensing boards to report all disciplinary actions taken to the Dept. to assist in identifying incompetent practitioners. As of January 1986, a House bill has passed and a similar bill is under consideration by the Senate and is expected to pass.

In an effort to promote continuing professional competency, states have adopted mandatory continuing education (MCE) requirements since 1972. There is increasingly strong evidence that MCE and continuing competency are not positively correlated. States are beginning to examine other methods to assess and ensure continuing individual competency. Private certifying agencies have devoted more resources and attention to developing methods that assess and ensure continuing competency.

A variety of methods, including self-assessment tests, periodic re-examination, chart audits, peer review, and computerized simulations are currently used by private certifying agencies to promote continuing competency among their credentialed membership. States will likely adopt these privately developed methods or spend considerable financial resources to develop their own methods in the future to go beyond MCE in assuring continuing competency.

Deciding When to Regulate One of the most difficult licensing decisions facing state legislators today is deciding when an occupation should be regulated by the state. In A Proposal for Credentialing Health Manpower, six criteria were suggested for determining whether a health occupational group should be regulated. According to the report, a health occupational group should be regulated if:

(1) The unregulated practice of an occupation will harm or endanger the health, safety and welfare of the public, and the potential for harm is recognizable and not remote or dependent on tenuous arguments.

(2) The practice of an occupation requires a high degree of skill, knowledge and training, and the public requires assurances of

initial skill and continuing occupational competence.

(3) The functions and responsibilities of the practitioner require independent judgment and the members of the occupational group practice independently.

(4) The scope-of-practice of an occupation is distinguishable from other licensed and unlicensed occupations.

(5) The economic impact on the public of regulating this occupational group is justified.

(6) There are no adequate alternatives to regulation (i.e., statutory certification or registration) that will protect the public.

In 1984 six states had adopted "sunrise" programs. Although the processes differ, the purpose is the same: to review and analyze requests from occupations for new forms of state regulation. After requests are reviewed, typically by a committee of health professionals, state regulators and consumers, a recommendation on each request is made on whether regulation is needed and at what level. At least six states are currently considering sunrise legislation (See Chapter XIII for more information on Sunrise).

Fraudulent Degrees In 1984, investigative reporting series in leading national newspapers drew attention to state licensing responsibilities. The New York Times, for instance, gave extensive coverage to the cases involving individuals who purchased phony medical degrees from Caribbean medical schools. It is estimated that there may be as many as 10,000 persons practicing medicine as hospital residents or licensed physicians with these fraudulently obtained medical degrees.

Examinations State regulators are aware that there are well-documented professional and legal standards which a licensing exam must meet. For example, one set of legal standards is contained in the equal employment opportunity guidelines. The licensing exam must be job-related and to meet a legal challenge, the exam should preferably be based on an empirically conducted job analysis. The exam must be reliable, according to statistical procedures, and the exam's cut-off scores which determine whether a person passes or fails the exam, must be established using accepted criterion. Clearly, licensing board members cannot have the expertise to independently develop and administer licensing examinations. Thus, more and more states are establishing a central testing office staffed by exam specialists to assist board members, and are using nationally developed licensing exams to provide some assurance that the exam was properly developed.

One of the most recent U.S. Supreme court cases involved an examination issue. The case -- Hoover vs. Ronwin was decided in June, 1984. In Ronwin, an unsuccessful candidate for admission to the Arizona Bar sued members of the Committee on Examinations and Admissions charging that the bar examiners established a cutoff score at an artificially high level to exclude competitors of current Arizona lawyers rather than to protect the public against incompetent practitioners.

The court found on the facts of the case that the particular bar examiners were immune from suit under federal anti-trust law. But the court specifically said its finding was limited to the bar examiners and would not necessarily apply to health and other regulatory boards.

Composition of Licensing Boards States continue to add consumer members on licensing boards to articulate the general public's interest in regulatory decisionmaking.

States increased the size of boards in over a dozen states in 1984 by adding consumer members or by adding representatives of allied health occupations regulated by the board.

Mandated Benefits States are enacting laws that require insurance policies to cover specific types of services (such as alcoholism treatment or mental health services), or services of specific health practitioners.

State legislatures are facing increased numbers of proposed bills mandating coverage of health care practitioners. There are both positive and negative aspects to expanding mandated coverage. Encouraging improved access to the services may be beneficial to the public. However, there is concern that mandated benefits increase the cost of health insurance because of the expanded access to and increased demand for expensive health care services.

In 1984 Washington State passed a bill establishing guidelines which must be addressed for all mandated coverage proposals before the legislature considers the bill.

In reviewing the case Metropolitan Life Insurance Company versus Commonwealth of Massachusetts, the U.S. Supreme Court ruled in June 1985 that states can mandate benefits in state insurance law. Specifically, the court found that a 1976 Massachusetts law mandating mental health benefits did not violate the federal Employee Retirement Income Security Act of 1974. Thus the issue of when and whether to mandate coverage of services and health practitioners is back in the legislative arena for resolution. (See State Credentialing of the Behavioral Science Professions: Counselors, Psychologists, and Social Workers for further discussion of mandated benefits.)

Purpose and Methodology of Report

This report is intended for state and federal policymakers, college and university health educators, professional association staff, and health care practitioners. The purposes of the report are threefold:

(1) to provide an overview of health personnel credentialing laws, regulatory actions and court decisions during the year;

(2) to provede current 50-state comparative data summaries on the most frequently asked questions about how states regulate particular health professions; and

(3) to inform policymakers that the Council of State Governments has the 50-state statutes and regulations on over 35 health occupations and professions on file for ready research.

Project staff have compiled a comprehensive collection of state statutes and regulations for the following health occupations and professions: Dental assistant, dental hygienist, dentist, denturist, emergency medical technician, dietician, homeopath, medical technologist, naturopath, physician, osteopath, physician's assistant, respiratory therapist, veterinarian, speech pathologist and audiologist, radiologic technologist, pharmacist, optometrist, optician, nursing home administrator, hospital administrator, psychologist, counselor, social worker, acupuncturist, chiropractor, licensed practical nurse, registered nurse, nurse midwife, nurse practitioner, occupational therapist, podiatrist, physical therapist, and nuclear medicine technician.

In developing the tables for the nine health occupations and professions included in this report, project staff read the statutes and regulations, filled in the table from the state law, and included a single citation where possible. Thus this report reflects information contained in state laws, not garnered by a 50-state survey. The tables and narrative were reviewed by the Advisory Committee and selected experts in the particular health field.

Key Terms Defined

Each of the nine health occupations and professions reviewed in-depth in this report are covered by nine tables. The tables' names are: Table 1- Type of State Regulation; Table 2- Organizational Pattern of State Regulatory Boards; Table 3- Functions of Licensing Boards and Agencies; Table 4- Enforcement Functions of Licensing Boards and Agencies; Table 5- Examination of Applicants; Table 6- Initial Requirements for licensure; Table 7- Schedule of Fees; Table 8- Reciprocity and Endorsement; and Table 9- Continuing Education Requirements.

Citations are listed for each table (except Tables 3 and 7) indicating the statute or regulation section listing the appropriate data. Citations appear where there are single source sections to cite and are not included where more than one section was used to extract the data.

Each table has footnotes to explain particular cases. However, terminology common to each table for all professions is defined below.

Table 1 - Type of State Regulation

Licensure:	This is the most restrictive of the three methods of regulation. In this survey, "licensure" means that it is illegal for a person to practice the profession without first meeting the standards imposed on the profession by the state and its regulating agency.
Certification:	This is a form of regulation whereby the state agency grants title recognition to persons meeting predetermined standards. Those without the title may perform the services of the profession, but only those

certified may use the title.

Registration: This form of regulation is appropriate when the threat to public health, safety and welfare is small. This form of regulation requires that a person file his name and address with a designated government agency before practicing his occupation.

Table 3 - Functions of Licensing Boards and Agencies

In approving or accrediting educational programs, the board may have approved a national agency to accredit an educational program. Using the example of occupational therapists, the board has the power to approve educational programs, but has chosen to approve programs accredited by the AMA and/or the AOTA. The board still has the power to approve programs that are not recognized by the national accrediting agency.

Regional refers to accreditation by one of six regional accrediting agencies that compose the Association of Secondary Schools and Colleges. The six are the New England Association of Colleges and Schools, the Middle States Association of Colleges and Schools, the North Central Association of Colleges and Schools, the North Western Association of Colleges and Schools, the Southern Association of Colleges and Schools, and the Western Association of Colleges and Schools.

Table 4 - Enforcement Functions

Suspend: The professional is not permitted to practice for a period of time.

Revoke: Involves the involuntary termination of the professional's license.

Restrict License: A reduction in the scope of practice.

Censure:	Similar to a reprimand. The agency makes an official statement of displeasure concerning the individual.
Reprimand:	The administrative agency reproves the professional. There may be public or private reprimands.
Probation:	The professional is permitted to practice, but the agency has imposed conditions upon the practice. Once the time period has elapsed, the practitioner may resume unconditionally.
Fine:	A monetary penalty imposed by the administrative agency for a violation of an administrative rule or regulation.

Table 8 - Reciprocity and Endorsement

Endorsement:	As used in this survey, endorsement is a waiver of the license examination if certain conditions are met. Each state has different conditions which are delineated as footnotes on the tables dealing with reciprocity and endorsement.
Reciprocity:	The professional may practice in a state other than in the one originally licensed only if the state which issued the original license allows the professionals licensed in the entering state to practice their profession within the original state. There are conditions which accompany reciprocity in many of the states.

CHAPTER II

STATE REGULATION OF HEALTH OCCUPATIONS AND PROFESSIONS

TABLE II-1

STATE REGULATION OF HEALTH OCCUPATIONS AND PROFESSIONS

	Acupuncturist	Audiologist/ Speech Pathologist	Chiropractors	Counselor (Pastoral, Guidance) Family & Marriage	Dentist	Denturist	Dietician	EMT	Hearing Aid Dealer/Fitter	LPN	RN
ALABAMA		L	L	L	L		C	L	L	L	L
ALASKA	L		L		L			L		L	L
ARIZONA	C		L		L	R		L	L	L	L
ARKANSAS		L	L	L	L			L	L	L	L
CALIFORNIA	L	L	L	L	L		C	L	L	L	L
COLORADO			L		L	R		L	L	L	L
CONNECTICUT		L	L	C	L			L	L	L	L
DELAWARE		L	L		L			L	L	L	L
FLORIDA	L	L	L	L	L			L	L	L	L
GEORGIA		L	L	L	L		L	L	L	L	L
HAWAII	L	L	L		L			L	L	L	L
IDAHO			L	L	L	R		L	L	L	L
ILLINOIS			L		L			L	L	L	L
INDIANA		L	L		L			L	L	L	L
IOWA		L	L		L		L	L	L	L	L
KANSAS			L		L			L	L	L	L
KENTUCKY		L	L		L			L	L	L	L
LOUISIANA	C	L	L		L		C	L	L	L	L
MAINE		L	L	R	L	R		L	L	L	L
MARYLAND	R	L	L	C	L		L	L	L	L	L
MASSACHUSETTS		L	L		L			L		L	L
MICHIGAN			L	R	L			L	L	L	L
MINNESOTA			L		L			L	L	L	L
MISSISSIPPI		L	L		L			L	L	L	L
MISSOURI		L	L		L			L	L	L	L
MONTANA	L	L	L	L	L	R	C	L	L	L	L
NEBRASKA		L	L		L			L	L	L	L
NEVADA	L	L	L	C	L			L	L	L	L
NEW HAMPSHIRE			L	C	L			L	L	L	L
NEW JERSEY	L	L	L	L	L			L	L	L	L
NEW MEXICO	L	L	L		L			L	L	L	L
NEW YORK	L	L	L		L			L	R	L	L
NORTH CAROLINA		L	L	C	L			L	L	L	L
NORTH DAKOTA		L	L		L		L	L	L	L	L
OHIO		L	L	L	L			L	L	L	L
OKLAHOMA		L	L		L		L	L	L	L	L
OREGON	L	L	L		L	R		L	L	L	L
PENNSYLVANIA		L	L		L			L	L	L	L
RHODE ISLAND	L	L	L		L			L	L	L	L
SOUTH CAROLINA		L	L	L	L			L	L	L	L
SOUTH DAKOTA	R		L		L			L	L	L	L
TENNESSEE		L	L	C	L			L	L	L	L
TEXAS		L	L	L	L		L	L	L	L	L
UTAH	L	L	L	L	L			L	L	L	L
VERMONT			L		L			L		L	L
VIRGINIA	L	L	L	L/C	L			L	L	L	L
WASHINGTON	L		L		L			L	L	L	L
WEST VIRGINIA	R		L		L			L	L	L	L
WISCONSIN			L		L			L	L	L	L
WYOMING		L	L		L			L	L	L	L
~~AMERICAN SAMOA~~											
GUAM								L			
~~PACIFIC TRUST~~											
PUERTO RICO			L		L		L			L	L
VIRGIN ISLANDS					L			L			
DC			L		L			L		L	L

Source: Health Professions Licensure Information System, December 1984
Key: L = Licensure; C = Certification; R = Registration

	Nurse Midwife	Nurse Practitioner	Med. Lab Technologist/ Technician	Nuclear Medicine Technologist	Nursing Home Administrator	Occupational Therapy	Physical Therapy	Optician	Optometrist	Pharmacist	Physician (MD, DO)
ALABAMA	C	C			L		L		L	L	L
ALASKA		C			L		L	L	L	L	L
ARIZONA	C	C			L		L	L	L	L	L
ARKANSAS	C	C			L	L	L	L	L	L	L
CALIFORNIA	C	C	L		L	C	L	L	L	L	L
COLORADO	C	C			L		L		L	L	L
CONNECTICUT	C				L	L	L	L	L	L	L
DELAWARE	C	C			L		L		L	L	L
FLORIDA	C	C	L		L	L	L	L	L	L	L
GEORGIA	C	C	L		L	L	L	L	L	L	L
HAWAII	C				L	C	L	L	L	L	L
IDAHO	C	C			L		L		L	L	L
ILLINOIS					L	L	L		L	L	L
INDIANA	C				L		L		L	L	L
IOWA	C	C			L	L	L	C	L	L	L
KANSAS	C	C			L		R		L	L	L
KENTUCKY	C	C			L		L	L	L	L	L
LOUISIANA	C	C			L	L	L		L	L	L
MAINE	C	C		L	L	L	L		L	L	L
MARYLAND	C	C			L	L	L		L	L	L
MASSACHUSETTS	C	C			L	L	L	L	L	L	L
MICHIGAN	C	C			L		L		L	L	L
MINNESOTA					L		R		L	L	L
MISSISSIPPI	C	C			L		L		L	L	L
MISSOURI					L		L		L	L	L
MONTANA	C	C			L	L	L		L	L	L
NEBRASKA	C	C			L	L	L		L	L	L
NEVADA	C	C			L		L	L	L	L	L
NEW HAMPSHIRE	C	C			L	L	L		L	L	L
NEW JERSEY	C	C		L	L		L	L	L	L	L
NEW MEXICO	C	C			L	L	L		L	L	L
NEW YORK	C		N.Y.C		L	L	L	L	L	L	L
NORTH CAROLINA	C	C			L	L	L	L	L	L	L
NORTH DAKOTA		C			L	L	L		L	L	L
OHIO	C				L	L	L	L	L	L	L
OKLAHOMA	C	C			L	L	L		L	L	L
OREGON	C	C			L	L	L		L	L	L
PENNSYLVANIA	C	C			L	L	L		L	L	L
RHODE ISLAND	C				L	L	L	L	L	L	L
SOUTH CAROLINA	C	C			L	L	L	L	L	L	L
SOUTH DAKOTA	C	C			L	L	L		L	L	L
TENNESSEE	C	C	L		L	L	L	L	L	L	L
TEXAS	C	C			L	L	L		L	L	L
UTAH	C	C			L	L	L		L	L	L
VERMONT	C	C			L		L	L	L	L	L
VIRGINIA	C	C			L		L	L	L	L	L
WASHINGTON	C	C			L	L	L	L	L	L	L
WEST VIRGINIA	C				L	L	L		L	L	L
WISCONSIN	C				L		L		L	L	L
WYOMING	C	C			L		L		L	L	L
DC					L	L	L		L	L	L
GUAM									L		L
PACIFIC TRUST											
PUERTO RICO						L	L	L	L	L	
VIRGIN ISLANDS									L		L

	Physician's Assistant	Podiatrist	Psychologist	Radiologic Technologist/Technician	Respiratory Therapist	Sanitarian	Social Worker	Veterinarian
ALABAMA	C	L	L				L	L
ALASKA	C	L	L					L
ARIZONA	C	L	C	L		R		L
ARKANSAS	C	L	L		L	R	L	L
CALIFORNIA	L	L	L	L	R/C	R	L	L
COLORADO	C	L	L				L/L/R	L
CONNECTICUT	C	L	L			R		L
DELAWARE		L	L	*			L	L
FLORIDA	C	L	L	L	L	R	L	L
GEORGIA	C	L	L			R	L	L
HAWAII	C	L	L	L		R		L
IDAHO	C	L	L			R	L	L
ILLINOIS	C	L	C	L			R	L
INDIANA	C	L	C	L		R		L
IOWA	C	L	L	*	C		L	L
KANSAS	C	L	C			R	L	L
KENTUCKY		L	L	L		R	L	L
LOUISIANA	C	L	C		L	R	L	L
MAINE	C	L	L	*	L		R	L
MARYLAND	C	L	L			R	L	L
MASSACHUSETTS	C	L	L	L		R	L	L
MICHIGAN	L	L	L			R	R	L
MINNESOTA		L	L	*		R		L
MISSISSIPPI		L	L			R		L
MISSOURI		L	L			R		L
MONTANA		L	L	L		R	L	L
NEBRASKA	C	L	L			R		L
NEVADA	C	L	L			R		L
NEW HAMPSHIRE	C	L	C				C	L
NEW JERSEY		L	L	L				L
NEW MEXICO	C	L	C	*	L			L
NEW YORK	R	L	L	L		R	L	L
NORTH CAROLINA	BA	L	L			R	C	L
NORTH DAKOTA	C	L	L		L		L	L
OHIO	C	L	L			R	L/R	L
OKLAHOMA	C	L	L			R	L	L
OREGON	C	L	L	L		R	R	L
PENNSYLVANIA	C	L	L					L
RHODE ISLAND	C	L	C			R	R	L
SOUTH CAROLINA	C	L	L			R	R	L
SOUTH DAKOTA	C	L	L				L	L
TENNESSEE		L	L	*		R	L	L
TEXAS		L	L		L	R	L/C	L
UTAH	C	L	L			R	L	L
VERMONT	C	L	L	L				L
VIRGINIA	BA	L	L		V.C.		L	L
WASHINGTON	C	L	L					L
WEST VIRGINIA	C	L	L	L		R	L	L
WISCONSIN	C	L	L			R		L
WYOMING	BA	L	L	L				L
DO[illegible]		L	L					L
GUAM								
PACIFIC TRUST								
PUERTO RICO		L	L	L				L
VIRGIN ISLANDS								L

B.D. = Board Approval submitted by Physicians
* Enabling Legislation
VC = Voluntary Cert.

KEY TO TABLE II-1

L = Licensure is the most restrictive form of state credentialing. Licensure means it is illegal for a person to practice the profession without first meeting the standards imposed by the state to be credentialed.

C = Certification is a form of regulation whereby the state grants title recognition to persons meeting predetermined standards. Non-certified people may perform the occupation's services, but only certified persons may use the designated title.

R = Registration requires that a person file his name and address with a designated government agency before practicing the occupation. In some instances, states will establish minimum education and training standards which must be met before a person can register.

NUMBERS OF STATES REGULATING THE HEALTH OCCUPATIONS
AND PROFESSIONS BY TYPE OF REGULATION: TABLE II-1 SUMMARIZED

PROFESSION	LICENSE	CERTIFY	REGISTER
Acupuncturist	14	2	3
Audiologist/Speech Pathologist	36		
Chiropractors	52		
Counselor (Pastoral, Guidance, Family & Marriage)	13	7	2
Dentist	53		
Denturist			6
Dietician	7	4	
EMT	53		
Hearing Aid Dealer/Fitter	46		1
LPN	52		
RN	52		
Nurse Midwife		45	
Nurse Practitioner		39	
Medical Laboratory Technologist/Technician	4		
Nuclear Medicine Technologist	2		
Nursing Home Administrator	51		
Occupational Therapy	30	2	
Physical Therapy	50		2
Optician	22	1	
Optometrist	53		
Pharmacist	52		
Physician (MD, DO)	53		
Physicians Assistant	2	35	1
Podiatrist	52		
Radiologic Technologist/Technician*	16		
Respiratory Therapist	7	2	1
Sanitarian			33
Social Worker	25	3	8
Veterinarian	53		

CHAPTER III

STATE LAWS PERTAINING TO HEALTH PROFESSIONS CREDENTIALING ENACTED IN 1985

STATE LAWS PERTAINING TO HEALTH PROFESSIONS CREDENTIALING ENACTED IN 1985

STATE	LAW NUMBER	STATUS	SUMMARY
Alabama	House 148	Enacted	Continues the Board of Examiners for Speech Pathology and Audiology
	House 152	Enacted	Continues the Board of Nursing
	House 153	Enacted	Continues the Board of Optometry
	House 154	Enacted	Continues the Board of Physical Therapy, with modifications.
	House 157	Enacted	Continues the Board of Podiatry, with certain modifications.
	House 158	Enacted	Continues the Board of Vet. Med. Examiners, with modifications.
Arizona	Senate 1050	Enacted	Relates to another ten years of life and expansion of authority of the State Veterinary Medical Examining Board.
	Senate 1051	Enacted	Relates to the suspension of unrenewed physician's assistant certificate.
	Senate 1052	Enacted	Provides that the examination administered by the board of medical examiners be given in two parts with a passing grade of 70% in each part, & requiring one year of training to retake the exam if failed the third time. Expands licensure by endorsement.
	Senate 1057	Enacted	Establishes a committee on nursing manpower and education to spend 1985 studying nurse supply and demand, nurses education, etc. and make recommendations on future nursing needs.
	Senate 1058	Enacted	Pays members of the state nursing board $100 a day plus expenses. If the governor couldn't find a qualified appointee for the board in the required category, he could name someone from another category. Limited license could be issued to a person who could not function safely in a specified setting. Temporary permit could be issued to a person with an inactive license who takes the board approved refresher course.

Arkansas	Senate 96	Enacted	Increase compensation received by members of the State Board of Nursing; permits a licensed nurse of another state when engaged in transporting patients into, out of, or through the state, to engage in practice in the state for a period of time not to exceed forty-eight hours for each transport.
California	Senate 117	Enacted	Exempts from the written examination and demonstration requirement for a license to practice dentistry, an applicant who is a graduate of a foreign dental school accredited by a body which has a reciprocal accreditation agreement with any commission or accreditation agency whose findings are accepted by the Board of Dental Examiners.
	SCR 18	Enacted	Recognizes the devoted care which doctors of chiropractic have bestowed upon their patients in California, and proclaims the week of April 22-28, 1985, as "California Chiropractic Wellness Week".
Colorado	Senate 13	Enacted	Provides for the continuation of the state board of nursing and further defines its powers and duties.
Florida	Senate 11A	Enacted	Allows certain dentists to administer nondental anesthesia.
Georgia	House 250	Enacted	Relates to reports by physicians and others regarding nonaccidental injuries to patients, so as to require such reports by certain personnel in ambulatory surgical centers.
	Senate 25	Enacted	Changes provisions relating to reinstatement of an expired license to practice veterinary medicine.
Hawaii	Senate 193	Enacted	Concerns temporary licenses for dentists.
	Senate 421	Enacted	Adds to qualifications for medical examination.

Idaho	House 8	Enacted	Establishes procedures whereby a graduate of a foreign college of pharmacy may qualify to take the Board of Pharmacy licensing examination.
	House 136	Enacted	Includes violation of State Pharmacy Code and Board of Pharmacy Administrative Rules as causes for suspension or revocation of a pharmacy license, allows the Board of Pharmacy, as an alternative to revocation or suspension, to levy a fine not to exceed $2,000 for violation of the Pharmacy Act, Controlled Substance Act, or Administrative Rules.
	House 156	Enacted	Provides that veterinarians may dispense or deliver prescription drugs upon the prescription of another veterinarian.
	House 253	Enacted	Provides that contact lenses may be sold or dispensed in a retail or wholesale outlet, or other permanently established place of business with an optical department, only when the prescription specifically states on its face that it is intended for contact lenses, and includes the type and specifications of the contact lens being prescribed.
Indiana	House 1627	Enacted	Changes the name of the committee of podiatry examiners to the committee on podiatric medicine; makes many other changes in the law concerning the licensing of podiatrists.
	Senate 277	Enacted	Makes numerous changes in the law regulating the practice of medicine and osteopathic medicine; other provisions.
Kansas	House 2338	Enacted	Concerns the Kansas Healing Arts Act. Relates to the granting of temporary permits and to licensure by examination. Provides standards for the approval of schools of medicine; creates institutional permits and repeals the existing sections.

Mississippi	House 711	Enacted	Increases certain fees charged by the State Board of Dental Examiners.
	House 849	Enacted	Provides that the fee paid to the Board of Pharmacy for examination shall not exceed the Board's cost in administering the exam.
	Senate 2796	Enacted	Continues use by optometrists of diagnostic pharmaceuticals.
	Senate 2844	Enacted	Appoints chiropractic board from current congressional districts.
Montana	House 214	Enacted	Provides for the registration of speech pathology aides and audiology aides; also provides for annual registration fees; changes the license renewal dates.
	House 233	Enacted	Changes the name of the Board of Veterinarians to the Board of Veterinary Medicine. Includes Dentistry in and eliminates ova or embryo transplant from the definition of veterinary medicine. Eliminates the exemption for employment of students as veterinarians' assistants. Changes the deadline for payment of the fee for renewal of a veterinarian's license.
	House 571	Enacted	Provides for the mandatory licensing and regulation of professional counselors; creates a state board of professional counselors; creates a communications privilege; provides penalties for violations; and allows disability and health insurance coverage for work done by licensed professional counselors.
	House 595	Enacted	Includes licensed social workers as permissible providers of medical assistance under the Medicaid program administered by the Department of Rehabilitation Services.
	Senate 79	Enacted	Provides for the licensing and regulation of occupational therapists and occupational therapy assistants; creates a board of occupational therapy practice; provides for the authority of the board; provides for an immediate effective date.

Montana	Senate 214	Enacted	Permits certain dental hygienists to administer local anesthetic agents; removes the requirement that an applicant for a license to practice dental hygiene submit to an oral interview.
	Senate 226	Enacted	Revises the law relating to the Board of Hearing Aid Dispensers; provides a continuing education requirement; revises the trainee license law; and gives the board authority to fine licensees.
	Senate 296	Enacted	Revises the examination grade requirements and reexamination procedures for a license to practice medicine.
Nebraska	L 129	Enacted	Redefines terms relating to the public health and welfare; provides for the registration and supervision of communication aides; provides powers and duties; changes provisions relating to audiologists and speech-language pathologists; provides for continuing education; eliminates obsolete language and a termination date; provides an operative date and repeals the original sections.
	L 132	Enacted	Changes the membership of a board as prescribed; defines and redefines terms; changes provisions relating to physician assistants. Creates a committee; provides duties; harmonizes provisions and repeals the original sections.
	L 250	Enacted	Changes provisions regarding continuing education requirements; harmonizes provisions; changes requirements for professional and occupational licenses. Eliminates a waiver; defines a term; provides for rules and regulations to govern apprenticeships in massage; prohibits certain practices and repeals the original sections.
	L 407	Enacted	Adopts the Nebraska Regulation of Health Professions Act; and provides severability.

Nevada	A 100	Enacted	Removes temptation for Nevada state board of optometry to recover costs of disciplinary hearing.
	Senate 54	Enacted	Removes exemption from examination for certification of dispensing opticians to fit contact lenses.
	Senate 129	Enacted	Changes requirements for practice of dentistry.
New Jersey	Senate 1923	Enacted	Adds one additional registered pharmacist member to the Board of Pharmacy.
	A 2001	Enacted	Provides for the licensing of certain podiatric x-ray technologists.
New Mexico	House 599	Enacted	Changes board membership requirements of the Pharmacy Board.
	House 56	Enacted	Allows certified registered nurse anesthetist to administer anesthesis, requires certification for nurse practitioners.
	House 179	Enacted	Provides insurance coverage for services provided by certified nurse-midwives and registered lay midwives.
	House 290	Enacted	Requires internship as required education to practice as an osteopathic physician.
	Senate 81	Enacted	Expands the definition of dental hygienist and adds a definition for general supervision under the Dental Act.
	Senate 28	Enacted	Changes prescribing and dispensing of pharmaceutical agents under the Optometry Act.
New York	Senate 686	Enacted	Provides that any person who is licensed to practice as a physician, physician's assistant, masseur, physical therapist, chiropractor, dentist, dental hygienist, veterinarian, nurse, podiatrist or optometrist in another state or territory appointed by the U. S. Olympic Committee to provide professional services to athletes and team personnel registered to train at the Olympic center may provide such services without first being licensed pursuant to the

			provisions of Title VIII of the Education law.
North Dakota	House 1164	Enacted	Relates to continuing pharmaceutical education.
	House 1181	Enacted	Relates to the powers of the board of pharmacy.
	House 1313	Enacted	Provides for the licensure and regulation of respiratory care practitioners; establishes a North Dakota respiratory care examining board and provides a penalty.
	House 1346	Enacted	Relates to education and continuing education requirements for optometrists.
	House 1537	Enacted	Relates to the powers of the state board of dental examiners, and to applications, examinations, fees, admissions, disciplinary actions and costs.
	Senate 2185	Enacted	Relates to reinstatement of physicians delinquent in the payment of registration fees.
	Senate 2195	Enacted	Relates to penalties, prosecutions, and minor violations of the Food, Drug and Cosmetic Act; and providing a penalty.
	Senate 2369	Enacted	Relates to educational requirements for licensure as a social worker.
	Senate 2374	Enacted	Relates to exceptions to the social work practice licensing requirements and the waiver of licensing requirements for certain social workers. Relates to the definition of social work practice and licensing requirements for private practice.
Oklahoma	House 1071	Enacted	Recreates the State Board of Examiners of Psychologists until July 1, 1991.
Oregan	Senate 320	Enacted	Reestablishes Oregan State Board of Nursing subject to subsequent "sunset" review; increases maximum penalty for violation of Nurse Practice Act; authorizes imposition of penalties against unlicensed persons violating the Act or rules adopted thereunder; directs certain persons to report suspected violations of the Act or any rule adopted pursuant thereto to the board.

Oregan	Senate 5524	Enacted	Limits biennial expenditures from fees, moneys or other revenues, including Miscellaneous Receipts, excluding federal funds, collected or received by the Physical Therapist Licensing Board.
South Carolina	House 2272	Enacted	Approves regulations of the Board of Examiners in Optometry relating to the revocation of certain regulations pertaining to the practice of optometry, designated as Regulation Document #429, pursuant to the provisions of Act 176 of 1977.
South Dakota	House 1339	Enacted	Amends certain provisions relating to the practice of optometry.
	Senate 30	Enacted	Defines physicians' assistants and nurse practitioners as qualified mental health professionals.
Tennessee	House 316	Enacted	Revises disciplinary, procedural and investigative provisions of certain healing arts occupations. Establishes certain activities permitted to nurse practitioners.
	House 663	Enacted	Includes dentists and oral surgeons in the regulation of certain health facilities.
	House 609	Enacted	Provides procedure for selecting hygienist as board member. Removes exemption of clinical instructors for licensing if applicant does not pass examination. Regulates dental assistants.
	Senate 117	Enacted	Revises certification of professional counselors and marital and family therapists.
	Senate 161	Enacted	Revises procedures and fees relative to licensing of nurses.
	Senate 434	Enacted	Increases medical professional licensing exam fees.
Utah	Senate 2	Enacted	Provides for the licensure of occupational therapists, specifies educational requirements and changes the board membership.
	Senate 3	Enacted	Restructures the licensure of dentists and dental hygienists.

Utah	Senate 4	Enacted	Restructures the licensure of physical therapists.
	Senate 6	Enacted	Provides for the reauthorization of the Nurse Practitioners Prescriptive Practice Act.
	Senate 7	Enacted	Provides for the licensure of recreational therapists and eliminates the specialty of therapeutic recreation worker.
	Senate 8	Enacted	Reauthorizes the Nurse Practice Act and revises the composition of the nursing board.
	Senate 9	Enacted	Restructures the licensure of veterinarians.
	Senate 11	Enacted	Provides changes in the regulation of podiatrists.
	Senate 93	Enacted	Provides for the registration of physician assistants by the division of registration. Gives the authority to division of registration to adopt rules and regulations relating to physician assistants and providing for registration fees.
	Senate 163	Enacted	Increases membership on Emergency Medical Services Committee from 11 to 13 members; increases notice of hearing for new licenses from five days to 40 days; amends definition of "Basic Life Support Personnel" to include Emergency Medical Dispatchers.
Washington	House 482	Enacted	Revises provisions relating to licensing of health care assistants; provides that persons applying for initial or continuing certification pay certain fees; appropriates monies from the general fund to the department of licensing.
Wyoming	House 10	Enacted	Increases the fees charged by the board of pharmacy for examination, license and registration to $200.00.
	House 268	Enacted	Authorizes emergency technicians who are not functioning as attendants to be certified. Allows that an attendant license may be granted for a period not to exceed three years.
	Senate 113	Enacted	Establishes the Board of Physical Therapy and provides for licensing, registration and fees. Appeal procedures would also be established.

Wyoming	Senate 144	Enacted	-	Clarifies and restricts the administration of general anesthetics to anesthesiologists or certified nurse anesthetists in relation to podiatry.
	House 294	Enacted		Establishes a Board of Radiologic Technologists Examiners and provides for licensure and regulation. Provides for administration, inspections, enforcement, fees and penalties.

CHAPTER IV

MAJOR COURT DECISIONS PERTAINING TO CREDENTIALING IN 1984

MAJOR COURT DECISIONS

STATE	CITATION	SUMMARY
Alabama	Rathle v Grote, 584 F. Supp 1128 (D.C. 1984)	Alabama statute which prohibited the practice of medicine "in such a manner as to endanger the health of the patients" withstood an attack on its constitutionality claiming it was vague and overbroad.
Arizona	Schmitz v Arizona St. Bd. of Dental Examiners, 684 P2d 918 (Ariz. App. 1984)	There is no requirement that all members, or any specific member of the investigative committee must be present at the proceedings of the committee.
Arkansas	Arkansas State Department of Health v Drs. Thibault and Council, 664 SW2d 445 (Ark. 1984)	Statute provided that an RN may give anesthesia in the presence of a licensed physician. Doctors and hospital could not allow registered nurses to administer epidural anesthesia to obstetrical patients without a physician present.
Colorado	People v Jeffers, 690 P2d 1194 (Colo. 1984)	Colorado statute withstood an attack on its constitutionality claiming it was vague. Court stated that the statute was "sufficiently detailed to allow individuals engaged in the 'healing arts' to conform their conduct to the law".
Florida	Gentile v Department of Professional Regulation, Board of Medical Examiners, 448 So2d 1087 (Fla. App. 1 Dist. 1984)	Making false and misleading statements on application for medical license by endorsement is relevant to applicants good moral character. Intentionally falsifying the application or untruthfully responding to inquiries is a valid ground for denying a license.
	Dept. of Professional Regulation, Board of Medical Examiners v Durrani, 455 So2d 515 (Fla. App. 1 Dist. 1984)	State Board of Medical Examiners' rule that required those applicants applying for licensure by endorsement meet the same examination requirements as those applicants applying for licensure through examination conforms with the legislative intent of the statute.

STATE	CITATION	SUMMARY
Florida	*Alvarez v Dept. of Professional Regulation, Acupuncture*, 458 So2d 808 (Fla. App. 1 Dist. 1984)	Department of Professional Regulations instructions as to the requirements on the practical portion of the acupuncture examination were substantially insufficient and misleading.
Georgia	*Central Anesthesia Associates, P.C. v Worthy*, 325 SE2d 819 (Ga. App. 1984)	Under Georgia law a physician's assistant cannot substitute himself for the "duly licensed physician with training or experience in anesthesia" required by law in the supervision of a student of anesthesia.
Louisiana	*Wilcox v Louisiana State Board of Medical Examiners*, 446 So2d 502 (La. App. 4 Cir. 1984)	Statute empowering the Board of Medical Examiners to suspend or revoke a doctor's license was not unconstitutionally vague since such provision incorporates federal and state law in the area and such laws define the language used in the statute.
Maryland	*State v Good Samaritan Hospital*, 473 A2d 892 (Md. 1984)	Means chosen in the podiatry statute to fulfill its purpose were not wholly irrelevant to achievement of State's police power objectives, and thus podiatry statute did not constitute denial of equal protection under Federal or State Constitutions. The same is true though the statute might benefit podiatrists while placing restrictions on hospitals.
Massachusetts	*Massachusetts Nurses Association v Board of Registration in Nursing*, 465 NE2d 1238 (Mass. App. 1984)	Statute providing that the Board of Registration in Nursing promulgate rules and regulations as to the procedure for approval of continuing education programs for nurses does not require that the Board adopt a procedure for conferring prior approval on all continuing education programs.

STATE	CITATION	SUMMARY
Minnesota	*Draganosky v Minnesota Board of Psychology*, 352 NW2d 432 (Minn. App. 1984)	Court held as arbitrary and capricious rules of the Board of Psychology where the practical results demand that graduates of domestic non-accredited schools meet more stringent standards than graduates of foreign institutions, even though the domestic programs might be as good or better than the foreign programs.
	Beaty v Minnesota Board of Teaching, 354 NW2d 466 (Minn. App. 1984)	Held a decision of the Board of Teaching denying an individual's application for licensure as arbitrary and capricious.
Mississippi	*Hogan v Mississippi Board of Nursing*, 457 SO2d 931 (Miss. 1984)	Held, because a statute permits revocation of a nursing license, it is penal in nature and must be strictly construed against the agency.
	Rayborn v Mississippi State Board of Dental Examiners, 601 F. Supp 537 (D.C. 1985)	The Mississippi's Dental Practice Act is not unconstitutional through its process of creating a Board of Dental Examiners composed of dentists who are publicly opposed to the practice of denturism so as to be unfair and impartial to denturists, as the Board's disciplinary powers are restricted to licensed dentists or licensed dental hygienists.
New Jersey	*Matter of Cole*, 476 A2d 836	Because statute authorizing revocation of license of physician was part of a uniform enforcement act and because opening sentence declared act to be remedial and called for literal construction, there was a strong implication of legislative intent toward validity of retroactive application.

STATE	CITATION	SUMMARY
New York	Lock v New York State Education Department, 477 NYS2d 783 (A.D. 3 Dept. 1984)	Upheld a decision by the Education Department denying the applicant a license to practice medicine.
North Carolina	State v Nelson, 317 SE2d 711 (N.C. App. 1984)	Statute prohibiting the practice of medicine without a license was not overbroad.
Puerto Rico	Suarez v Junta Dental Examinadora, 580 F.Supp. 334 (1984)	Puerto Rico statute precluding would-be dentists from taking licensing examination did not deprive them of equal protection when the applicants knew that they would be precluded before they enrolled in the foreign dental school.
South Carolina	Gale V State Board of Medical Examiners of South Carolina, 320 SE2d 35 (S.C. App 1984)	Statute permitting State Board of Medical Examiners to impose sanctions on physicians for designated acts of medical misconduct did not grant Board unbridled, uncontrolled or arbitrary power in violation of nondelegation doctrine.
Texas	Madden v Texas Board of Chiropractic Examiners, 663 SW2d 622 (Tex. App. 3 Dist. 1983)	Statute which entitles an applicant denied a license to a hearing, implies an adjudicatory hearing. An adjudicatory hearing invokes the Texas Administrative Procedure and Texas Register Act.
Wisconsin	Gilbert v State Medical Examining Board, 349 N.W.2nd (Wisconsin,1984).	Standard utilized by Legislature and further interpreted by Medical Examining Board provided a standard for revocation sufficiently definite so that physicians should have no difficulty providing a standard of care which meets the requirement of professional conduct; thus, delegation of legislative authority to Medical Examining Board to define and enforce unprofessional conduct was valid.

CHAPTER V

STATE REGULATION OF ACUPUNCTURE

ACUPUNCTURIST

Type of State Regulation Twenty two states regulate acupuncturists as independent practitioners: 12 states license, two states certify and three states register acupuncturists. One state, Georgia, approves the practice of acupuncture in an experimental mode only. See Table IV-1 for a breakdown of the type of state regulation among those states that regulate acupuncturists.

Scope of Practice States which do not regulate acupuncturists as independent practitioners allow physicians (M.D.) to practice acupuncture as part of the practice of medicine. States which regulate acupuncturists as independent practitioners have passed these laws to regulate non-physician acupuncturists. The states which license acupuncturists fall into two distinct categories. One category involves the use of needle insertion as a means of controlling and regulating the flow and balance of energy in the body. An example of this type of jurisdiction is evidenced by New Mexico's scope of practice:

> A. "acupuncture" means the insertion of needles into the human body by piercing the skin of the body for the purpose of controlling and regulating the flow and balance of energy in the body.

Eight states regulate acupuncture within the above scope of practice.

The Traditional Acupuncture Institute has adopted a Model Act which follows the New Mexico type of practice definition:

> "Acupuncture" is a health care system which uses the stimulation of a certain point or points on or near the surface of the body by the insertion of needles to prevent or modify the perception of pain or to normalize physiological functions, including, but not limited to pain control, for the treatment of certain energetic dysfunctions of

> the body. Acupuncture is also the evaluation and treatment of energetic imbalances using traditional Asian methodologies such as pulse and tongue evaluation, the insertion and manipulation of acupuncture needles, the use of thermal or electrial stimulation of acupuncture points, and as further defined by the Board.

The second category of acupuncturists includes those who use methods which include needle insertion but also involve other forms of acupuncture. An example of this definition is California. California's scope of practice reads:

> "Acupuncture" means the stimulation of a certain point or points on or near the surface of the body by the insertion of needles to prevent or modify the perception of pain or to normalize physiological functions, including pain control, for the treatment of certain diseases or dysfunctions of the body and includes the techniques of electroacupuncture, cupping, and moxibustion.

Four states use the above type scope of practice.

Organization of State Regulatory Bodies and Functions Less than half of the states regulate acupuncturists with a separate acupuncture board. Most states regulate the profession through the state's medical board, although some of the states utilize an acupuncture advisory committee. The states that use the medical board or chiropractic board without an advisory committee do not have any members on the board who are acupuncturists. See Table IV-2 for a detailed breakdown of boards and their members.

In nearly every state the boards issue the license and promulgate the rules and regulations. (See Table IV-3).

All of the states allow the acupuncturists' regulating body to revoke or suspend the practitioner's license. There are other methods of discipline which the various states allow the boards to impose, for example, four states can impose an administrative fine. For a detailed listing see Table IV-4.

All but four of the states require an examination be given. Most of the states require that the state board may administer or delegate administration of their examination while two states' laws specifically mention the use of a National Board Examination. Most of the states require a practical examination in conjunction with the written examination. (See Table IV-5).

Requirements for Licensure Table IV-6 reflects the initial requirements for licensure. These requirements are diverse and major trends are hard to establish.

Continuing Education Requirements Less than half of the states require the acupuncturist to participate in continuing education as a prerequisite to license renewal. (See Table IV-9).

Interstate Recognition of Credentials Table IV-8 contains information regarding the endorsement or reciprocal recognition of acupuncturists from other states and the conditions for the recognition. Most states do not provide for either endorsement or reciprocity. Of those that do, (seven states) the majority (six states) use endorsement.

Fee Schedule Table IV-7 contains the fee schedule for acupuncturists.

TABLE IV-1

ACUPUNCTURIST
TYPE OF STATE REGULATION

STATE	TYPE	CITATION
Alaska	Licensure	AS 08.64.170
Arizona	Certification	ARS 32-924.21
California	Certification*	Bus. & Prof. Code 4935
Florida	Certification*	FS 457.105
Georgia	Approval a	R 360-6-.01
Hawaii	Licensure	S.B. No. 665 sec. 3
Louisiana	Certification	RS 37:1357
Maryland	Registration	ACM 14-605(c)
Montana	Licensure	MCA 37-13-301
Nevada	Licensure	NRS 634A.040
New Mexico	Licensure	NMSA 61-14A-3
New Jersey	Certification*	NJSA 45-2C-12
New York	Licensure	CLNYA 60.9-a1
	Certification	CLNYA 60.9-a2
	Registration	CLNYA 60.9-a3
Oregon	Registration*	ORS 677-760
Rhode Island	Licensure	GLRI 5-37.2-2(3)
South Carolina	b	CLSC 40-47-70
South Dakota	Registration	Bd of Chiro Policy on Acu.
Texas	c	R 183.1
Utah	Licensure	UCA 58-12-58(3)
Virginia	Registration*	Rule 1.1
West Virginia	Registration d	
Washington	Licensure e	RCW 18:71A.070

Source: HPLIS/CSG; December 31, 1984

KEY:

* Although this is designated in the state law as certification or registration, according to this study's definition of licensure, certification and registration, it is in effect licensure.

a Licensed physicians must get approval from the Board of Medical Examiners to investigate and experiment with the use of acupuncture. They must comply fully with the requirements of the Board and of the Federal Food and Drug Administration.

b Licensed medical doctors and dentists may practice acupuncture with the written approval of the State Board of Medical Examiners.

c A physician must apply to the Texas State Board of Medical Examiners for approval to supervise the services of a specific acupuncturist.

d A licensed medical doctor must register in writing with the Board of medicine to practice acupuncture. There are no other requirements.

e Licensed as an acupuncture physicians assistant who shall perform acupuncture only under the direct supervision of a licensed physician.

TABLE IV-2

ACUPUNCTURIST
ORGANIZATIONAL PATTERN OF STATE REGULATORY BOARD

		NO. OF BOARD MEMBERS				
STATE	NAME OF BOARD & DEPARTMENT	PROF.	PUB.	OTH.	TOTAL	CITATION
Alaska	State Medical Board Dept. of Commerce & Econ. Dev.	0	2	5a	7	AS 08.64.010
Arizona	Bd. of Chiropractic Examiners	0	2	3	5b	ARS 32-901
California	Acupuncture Examining Committee Bd. of Medical Quality Assurance	5c	4	2d	11	CBPC 4928-4929
Florida	Board of Acupuncture Dept. of Professional Regulation	3	1	1e	5	FS 457.103
Georgia	Composite St. Bd. of Med. Examiners Examining Bd's Div of Office of Secretary of State	0	1	12a	13	R 360-1.01
Hawaii	Bd. of Acupuncture Dept. of Commerce and Consumer Affairs	3	2	0	5	H. B. 665f s 6
Louisiana	St. Bd. of Medical Examiners	0	0	7a	7	RS 37-1263
Maryland	Acupuncture Advisory Council Board of Medical Examiners	3f	0	2a	5	ACM 14-605(h)
Montana	St. Bd. of Medical Examiners Department of Commerce	0	2	7k	9	MCA 2-15-1841
Nevada	St. Bd. of Oriental Medicine	5	0	0	5	NRS 6344
New Jersey	Acupuncture Examining Board Dept. of Public law and Safety	4	2	3g	9	NJSA 45:2C-3
New Mexico	Acupuncture Board Health and Environment Dept.	4	1	2a	7	NMSA 61-14A-6
New York	State Board for Medicine State Education Department	0	0	20	20	CLNYA
Oregon	Board of Medical Examiners	0	1	7h	8	ORS 677.235
Rhode Island	State Board of Acupuncture Department of Health				5	GLRI 5-37.2-3
South Dakota	Bd. of Chiropractic Examiners Department of Commerce	0	1	3b	4	SDCL 36-5-3
Texas	St. Bd. of Medical Examiners	0	3	12a	15	TRCSA4495b-2.05

STATE	NAME OF BOARD & DEPARTMENT	PROF.	PUB.	OTH.	TOTAL	CITATION
Utah	Acupuncture Board Dept. of Business Regulation	2	1	2i	5	UCA 58-12-59
Virginia	Advisory Committee on Acupuncture Va. Board of Medicine	3	0	2j	5	Rule 2.3G
Washington	Bd. of Medical Examiners Dept. of Licensing	0	1	6j	7	RCW 18.71.015

Source: HPLIS/CSG; December 31, 1984

KEY:

a	Licensed physicians
b	Chiropractors
c	Not licensed as physicians and surgeons and with ten years experience in acupuncture.
d	Physicians and surgeons licensed in Cal. with two years experience in acupuncture.
e	A licensed medical doctor who uses acupuncture in his/her practice.
f	Who are not licensed physicians.
g	Two physicians and surgeons with two years experience in acupuncture; one of whom shall be from a department in the Executive Branch of the State Government.
h	Six of whom have the degree of Doctor of Medicine and one Doctor of Osteopathy.
i	One medical doctor and one licensed health care practitioner, both with knowledge and experience in acupuncture.
j	Two members of the Board of Medicine
k	Five doctors of medicine; one doctor of osteopathy; one licensed podiatrist
l	All members shall be graduate physicians or surgeons and practitioners.

TABLE IV-3

ACUPUNCTURIST
FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	ISSUE LICENSE	APPROVE/ACCREDIT EDUCATIONAL PROGRAM	PROMULGATE REGULATIONS
Alaska	Board	a	Board
Arizona	Board	Board	Board
California	Committee	Committee	Committee
Florida	Board	Board	Board
Georgia	Board	Board	Board
Hawaii	Board	Board	Board
Louisiana	Board	Board	Board
Maryland	Board	Board	Board/Council
Montana	Board	Board/AMA	Board
Nevada	Board	Board	Board
New Jersey	Board	Board	Board
New Mexico	Board	Board	Board
New York	Department	Department	Board
Oregon	Board	Board	Board
Rhode Island	Board	Board	Board
South Dakota	Board	Board	Board
Texas	b	Board	Board
Utah	Board	Board	Board
Virginia	Committee/Board	Board	Committee/Board
Washington	Department	Board	Board

Source: HPLIS/CSG; December 31, 1984

KEY:

a Accredited by the Association of American Medical Colleges and the Council on Medical Education of the American Medical Association.

b There is no licensure, registration or certification. The Board of Medical Examiners approves the application of a Doctor of Medicine or Doctor of Osteopathy to supervise the work of a specific acpuncturist. The Doctor assumes responsibility and legal liability for the services rendered by the acupuncturist.

TABLE IV-4

ACUPUNCTURIST
ENFORCEMENT FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	CITATION	SUSPEND	REVOKE	RESTRICT LICENSE	CENSURE	REPRIMAND	PROBATION	FINE	OTHER
Alaska	AS 08.64.331	x	x	x	x		x	x	
Arizona	ARS 32-924	x	x		x	x		$500*	
California	CBPC 1399.430	x	x	x			x		
Florida	FS 457.109(2)	x	x	x		x	$1000*		
Georgia	R 360-2-08		x						
Hawaii	H.B. 665 sec 10	x	x						
Louisiana	RS 37:3011	x	x				x		
Maryland	ACM 14-504	x	x			x	x		
Montana	MCA 37-13-312	x	x				x		a
Nevada	NRS 634A.160	x	x						
New Jersey	NJSA 45:2c-17	x	x						
New Mexico	NMSA 61-14A-14	x	x						
New York	CLNYA 6511	x	x	x	x	x		$1000*	c,d
Oregon	ORS 677.860	x	x						
Rhode Island	GLRI 5-37.2-15	x	x						
South Dakota	SDCL 36-5-16	x	x			x	x		
Texas	Med. Act 4.01	x	x						b
Utah	UCA 58-12-63	x	x						
Virginia	CV 54-316	x	x		x	x	x		
Washington	RCW 18.72.150	x		x					

Source: HPLIS/CSG; December 31, 1984

KEY:

* Not to exceed
a May take other disciplinary action
b May deny an application or withdraw its approval
c Licensee may be required to perform up to 100 hours of public service
d Licensee may be required to pursue a course of education or training.

TABLE IV-5

ACUPUNCTURIST

EXAMINATION OF APPLICANTS

STATE	WRITTEN EXAM USED	ORAL	PRACTICAL	CITATION
Alaska	x	yes		AS 08.64.220
Arizona	x	yes	yes	R 4-7-41
California	x	yes	yes	CB&PC 1399.443
Florida	x		yes	R 21AA-3.04
Georgia	no			
Hawaii	x			H.B. 665 sec 5
Louisiana	no			
Maryland	x			
Montana	x		may	MCA 37-13-303
Nevada	x	yes	yes	NRS 634A.100
New Jersey	z	yes	yes	NJSA 45:2c-10
New Mexico	x		yes	NMSA 61-14A-11
New York	Exam may be required as an additional requirement.			
Oregon	x	yes	yes	R 847-70-015(2)
Rhode Island	x		yes	GLRI 5-37.2-11
South Dakota	x		yes	Chiro Policy
Texas	no			
Utah	z		yes	R not yet adopted
Virginia	no			
Washington	x		x	WAC 308-52-510

Source: HPLIS/CSG; December 31, 1984

KEY:

x An examination shall be administered by the Board.
z National Board Certification Examination administered by the National Commission for Certification of Acupunturists.

TABLE IV-6

ACUPUNCTURIST
INITIAL REQUIREMENTS FOR LICENSE APPLICANTS

STATE	CITATION	ED.	INTERN.[1]	MORALS	AGE	CIT.	RES.	WORK EXP.
Alaska	AS 08.64.207	a+b	1 yr.			yes		
Arizona	R 4-7-41	s						
California	CBPC 4938	c			18			yes
Florida	FSA 457.105	d			18	yes*		yes
Georgia	R 360-6.01	e						
Hawaii	H.B. 665 s.5	d+v	1 yr.					
Louisiana	RS 37:1357	t						
Acupuncturists' Assistant		u						
Maryland	ACM 14-605	b		r	21			
Montana	MCA37-13-301.2	f or g		q	18			
Nevada	NRS 634A.040	c+h		r				yes
New Jersey	Bill 762	(Bach+d) or g or i		q	21			yes
New Mexico	NMSA 61-14A-9	g	500 hrs.	q			yes	
New York	CLNYA 60.9B							
Licensure		j		q,r				
Certification		k	100 hrs	q,r				
Registration		l	100 hrs	q,r				
Oregon	R 847-70-015	f	1 yr.	q,r				
Rhode Island	15-37.2-12	m			21			
Acupuncture Assistant		n			21			
South Dakota	Chiro Policy	o						
Texas	R 183.2	d	2 yrs.	q,r	18		yes	
Utah	58-12-60	d	500 hrs		21		yes	
Virginia	R 1.1	p						
Washington	WAC 308-52-500	w+d	350 hrs.	r				

Source: HPLIS/CSG; December 31, 1984

KEY:

1 An internship is defined as supervised work experience.
* Or a permanent resident of the U.S., or a legal alien who has resided in the U.S. for 6 months immediately prior to qualifying for the exam.
a Graduate of an accredited medical school.
b Meet educational and/or experiential requirements of the Board.
c Completion of an approved education and training program or tutorial program
d Completion of a Board approved two year program.
e Board approval of 100 hours of training.
f Graduate of an approved school of acupuncture.
g Completion of a course approved by the Board.

h Six years of training

i At least three years experience practicing acupuncture which is board recognized; or is licensed to practice medicine and surgery; or registered to practice physical therapy in this state.

j Licensed as a Doctor of Acupuncture, herb physician, or Doctor of traditional Chinese medicine; with ten years experience.

k Licensed to practice medicine or dentistry; 300 hours of instruction.

l Graduate of school of medicine, acupuncture, herb medicine or traditional Chinese medicine; 200 hours of instruction and five years experience.

m Certificate from an accredited program and ten years experience.

n Completion of a 36 month course with three years experience.

o Chiropractor and 200 hours of study recognized by the Council on Chiropractic Education.

p M.D., D.O., or D.P.M.; 100 hours post graduate training in a school of acupuncture.

q Good moral character

r Must be proficient in the English language.

s Licensed Chiropractor

t Physician licensed to practice in Louisiana; and completion of six months training in Traditional Chinese Acupuncture in a school or clinic approved by the board.

u Completion of 36 months training in a school or clinic of Traditional Chinese Acupuncture approved by the board; or, an individual who has been appointed or employed at a licensed or accredited Louisiana hospital, medical school or clinic to perform acupuncture for research purposes. The acupuncturists' assistant must be employed by and work under the physical direction, control and supervision of a physician or an acupuncturist certified by the board to practice acupuncture; and must perform such duties at the place of employer's practice or in the physical presence of the employer.

v Diploma from an approved qualified tutor. Tutorships approved by the board prior to December 31, 1984 shall be acceptable for examination upon their completion. Tutorships shall no longer be accepted for qualification for examination after June 30. 1987.

w Completion of two years of college in the general sciences and the humanities.

TABLE IV-7

ACUPUNCTURIST
SCHEDULE OF FEES

STATE	APPLICATION	EXAM	RENEWAL	TEMPORARY	DUPLICATE	RECIPROCAL
Alaska	$50	$200	$600/4 yrs	$50		$200
Arizona	$50					
California	$150*		$150*/Bi			
Florida	$150	$300	$200/Bi			
Georgia	no additional fees required for approval to practice acupuncture					
Hawaii**		$60	$20/Bi			
Louisiana	$100		$25/An			
Maryland	$150		$50/Bi			
Montana	a	$50	$20/An			$20
Nevada	$300b		$100/An			
New Jersey	$200e					
New Mexico	$150		$25/An			
New York	$125c		/Bi			
Oregon	$125	$50d	/An			
Rhode Island	$100d		$500*/An			
South Dakota	no additional fees required for acupuncture registration					
Texas	none required					
Utah	$100	$150	$50/Bi		$5	
Virginia	$100c		$50/Bi		$2	
Washington	$25					$25

Source: HPLIS/CSG; December 31, 1984

KEY:

* Shall not exceed

** Information taken from Health Licensure Fees, a document compiled by C.L.E.A.R. in December 1982. Due to the age of the document the fees may not be accurate.

a A $20 licensure fee is required after passing exam and before license is issued. Each applicant shall also submit a $350 deposit to defray expenses of investigations into applicant's training and background. The balance will be refunded. If the cost of the investigation exceeds the deposit, no further consideration will be given to the applicant until additional fees are tendered as the Board deems necessary to complete the investigation.

b A nonrefundable fee to be used to defray the cost of the investigation of applicant's background and training. If the cost of the investigation exceeds the $300, no further consideration will be given until further fees are tendered by the applicant.

c Initial registration or licensure fee.

d And any other fees required by the Board for an investigation of the applicant, or for services of a translator if required.

e Includes examination fee.

TABLE IV-8

ACUPUNCTURIST
RECIPROCITY AND ENDORSEMENT

STATE	TYPE	CONDITIONS	CITATION
Alaska	Endorsement	(c+a)or b	AS 08.64.250
Arizona	None		
California	None		
Florida	None		
Georgia	None		
Hawaii	None		
Louisiana	None		
Maryland	Endorsement	c	
Montana	Endorsement	c	MCA 8.28.506
Nevada	Endorsement	h	
New Jersey	None		
New Mexico	Reciprocity	a+d	NMSA 61-14A-12
New York	e		
Oregon	None		
Rhode Island	None		
South Dakota	Endorsement	c	
Texas	None		
Utah	Being promulgated		
Virginia	f		
Washington	Endorsement	g	WAC 308-52-500

Source: HPLIS/CSG; December 31, 1984

KEY:

a Applicant must have an active license from a board of medical examiners from a state or territory of the U.S. or a province of Canada.
b Applicant must have passed an exam given by the National Board of Medical Examiners or the Federation of State Medical Boards of the U.S.
c Applicant must meet the requirements of this state or similar requirements.
d The state will examine each applicant's practical application of acupuncture techniques.
e The Department shall evaluate the acceptability of licenses issued by any state or foreign country.
f The Virginia Board of Medicine approves the 100 hours of post graduate training required.
g Must have passed an examination and be licensed in another state or country and meet the requirements of the board.
h Has practiced Oriental medicine for at least 20 years immediately preceding April 19,1973; or if the applicant has obtained a certificate from the Republic of China, the Peoples Republic of China, Korea or Japan acknowledging that the applicant is qualified to practice Oriental medicine, then the applicant will be granted endorsement.

TABLE IV-9

ACUPUNCTURIST
CONTINUING EDUCATION REQUIREMENTS

STATE	REQUIRED	CITATION	EXTENT OF EDUCATION
Alaska	Yes	AS 08.64.312	Prescribed by reg's
Arizona	No		
California	Yes a	CBPC 4945	30 hrs. biennially
Florida	May	FS 457.107	Not to exceed 20 hrs/Bi
Georgia	No		
Hawaii	No		
Louisiana	Yes		Board may vary the amount.
Maryland	Yes		40 credits biennially
Montana	No		
Nevada	No		
New Jersey	No	NJSA 45:2c-15	Board shall establish
New Mexico	May	NMSA 61-14A-13	
New York	No		
Oregon	No		
Rhode Island	NO		
South Dakota	No		
Texas	No		
Utah	Being promulgated		
Virginia	No		
Washington	Yes	WAC 308-52-201	50 hours annually

Source: HPLIS/CSG; December 31, 1984

KEY:

a The Committee may establish standards prior to January 1, 1986. After that date the Committee shall establish.

CHAPTER VI

STATE REGULATION OF CHIROPRACTIC MEDICINE

CHIROPRACTOR

Type of State Regulation All fifty states, the District of Columbia and Puerto Rico regulate chiropractors through licensure. (See Table V-1).

Scope of Practice There has been no Model Practice Act published by a professional chiropractic agency. This fact may in part explain the diversity in the states regarding the scope of practice for chiropractic medicine.

A comparison of scopes of practice will best illustrate this diversity. Nebraska has a scope of practice that is skeletal in nature:

> Chiropractic practice defined. For purposes of this act, the following classes of persons shall be deemed to be engaged in the practice of chiropractic: (1) Persons publicly professing to be chiropractors, or publicly professing to assume the duties incident to the practice of chiropractic; and (2) persons who treat human ailments by the adjustment by hand of any articulation of the spine.

In another section of Nebraska's law chiropractors are prohibited from administering drugs or practicing surgery.

Florida's statute offers a more detailed description of what constitutes the practice of chiropractic medicine:

> (3)(a) "Practice of chiropractic" means a noncombative principle and practice consisting of the science of the adjustment, manipulation, and treatment of the human body in which vertebral subluxations and other malpositioned articulations and structures that are interfering with the normal generation, transmission, and expression of nerve impulse between the brain, organs and tissue cells of the

body, thereby causing disease, are adjusted, manipulated, or treated, thus restoring the normal flow of nerve impulse which produces normal function and consequent health.

(b) Any chiropractic physician who has complied with the provisions of this chapter may examine, analyze, and diagnose the human living body and its diseases by the use of any physical, chemical, electrical, or thermal method; use the X ray for diagnosing; and use any other general method of examination for diagnosis and analysis taught in any school of chiropractic recognized and approved by the Board of Chiropractic.

(c) Chiropractic physicians may adjust, manipulate, or treat the human body by manual, mechanical, electrical, or natural methods or by the use of physical means or physiotherapy, including light, heat, water, or exercise, or by the oral administration of foods, food concentrates, and food extracts and may apply first aid and hygiene, but chiropractic physicians are expressly prohibited from prescribing or administering to any person any medicine or drug, from performing any surgery except as stated herein, or from practicing obstetrics.

(d) Chiropractic physicians shall have the privileges of services from the Department of Health and Rehabilitative Services laboratories.

(e) The term "chiropractic" or "doctor of chiropractic" or "chiropractor" shall be synonymous with "chiropractic physician", and each term shall be construed to mean a practitioner of chiropractic as the same has been defined herein. Chiropractic physicians may analyze and diagnose the physical conditions of the

> human body to determine the abnormal functions of the human organism and to determine such functions as are abnormally expressed and the cause of such abnormal expression.
>
> (f) Any chiropractic physician who has complied with the provisions of this chapter is authorized to analyze and diagnose abnormal bodily functions and to adjust the physical representative of the primary cause of disease as is herein defined and provided. As an incident to the care of the sick, chiropractic physicians may advise and instruct patients in all matters pertaining to hygiene and sanitary measures as taught and approved by recognized chiropractic schools and colleges.

As is readily discernible the Florida statute is much more detailed than Nebraska's. This does not mean that chiropractors in Florida have a wider range of practice. In fact, the opposite may be true. Florida's statute may be so detailed that any matter not discussed within the scope of practice section is not within the realm of chiropractic medicine, while the Nebraska statute may be interpreted broadly and may include any form of practice not specifically excluded.

Most scopes of practice fall somewhere between these two extremes. Most of the statutes expressly prohibit chiropractors from administering drugs (48 jurisdictions) and surgery (49 jurisdictions). Two states make no mention of administering drugs or performing surgery. Twenty six states expressly prohibit chiropractors from practicing obstetrics.

A new area of concern within the chiropractic field is the use of acupuncture. Twelve states expressly prohibit chiropractors from using acupuncture within their scope of practice. Three states allow acupuncture, but as a specialty area.

Seven states allow venipuncture for the purpose of taking blood for analysis.

Two states expressly give chiropractors hospital privileges.

Organization of State Regulatory Bodies and Functions The vast majority of the states use a board of chiropractic examiners to regulate the profession. Four states regulate chiropractors under Medical Boards or Healing Arts boards. For detailed information see Table V-2. All of the states have chiropractors sitting on the large boards, and in all but four cases, the chiropractors comprise a majority of board members. A slim majority of the states (i.e. 35 of 52) also include public members on boards. See Table V-2.

An overwhelming majority of the states utilize the board as the body which issues the license and promulgates the rules and regulations for the profession. In most cases the board will also either approve or accredit the educational programs. Other agencies which are recognized as accrediting agencies include the Council on Chiropractic Education, the Council on Post-Secondary Education, the State Licensing Department, and sometimes a separate college or university. (See Table V-3 for more information).

All states give the regulating body the power to suspend and/or revoke a chiropractor's license. Nineteen states have the power to put a practitioner on probation. The various disciplinary sanctions are listed in Table V-4.

Most of the states examine their applicants through a board administered examination. Most states use a practical examination as well as a written exam, and many also administer an oral examination.

See Table V-5 for a specific breakdown.

Requirements for Licensure All states require that the practitioner complete a course of study in chiropractic medicine. Many states require varying levels of pre-chiropractic collegiate study. (See Table V-6). Most states require the practitioner be of good moral character.

Continuing Education Requirements Forty-one states require that the practitioner meet continuing education requirements for license renewal. Table V-9 sets out which states require continuing education and the extent of that education.

Interstate Recognition of Credentials The majority of states endorse the license of chiropractors from other states, while a substantial minority of states (twelve) require reciprocal arrangements with other states before license recognition. See Table V-8 for the requirements regarding endorsement and reciprocity.

Fee Schedule Table V-7 sets out the fees for licensure application, renewal and other categories regarding chiropractors.

TABLE V-1

CHIROPRACTOR
TYPE OF STATE REGULATION

STATE	TYPE	CITATION
Alabama	Licensure	CA Rule 190-X-2
Alaska	Licensure	AS 08.20.110
Arizona	Licensure	ARSA 32-926
Arkansas	Licensure	AS 72-416
California	Licensure	CBPC 1000-5
Colorado	Licensure	CRS 12-33-101
Connecticut	Licensure	CGS sections 20-27
Delaware	Licensure	DCA Rules 706
Florida	Licensure	FS 460-411
Georgia	Licensure	OCG 43-9-19
Hawaii	Licensure	HRS 442-7
Idaho	Licensure	IC 54-702
Illinois	Licensure	111 IRS 4403
Indiana	Licensure	IC
Iowa	Licensure	IC 470-141.12(151)
Kansas	Licensure	KSA 65-2803
Kentucky	Licensure	KRS 312.018
Louisiana	Licensure	LRS 2805
Maine	Licensure	32 MRSA 552 32
Maryland	Licensure	MCA 3-301
Massachusetts	Licensure	ALM Rule 91
Michigan	Licensure	amendment to the rules
Minnesota	Licensure	148.06
Mississippi	Licensure	MS 73-6-13
Missouri	Licensure	MO 331.030
Montana	Licensure	MCA 37-12-301
Nebraska	Licensure	RSN 71-179
Nevada	Licensure	NRS 634.208
New Hampshire	Licensure	NHRSA 316:9
New Jersey	Licensure	NJSA 45:9-14.5
New Mexico	Licensure	NMSA 61-4-4
New York	Licensure	CLNYA 6501
North Carolina	Licensure	NCGS 90-147
North Dakota	Licensure	NDCC 17-02-01-01
Ohio	Licensure	ORCA 4734.08
Oklahoma	Licensure	OS 725.2
Oregon	Licensure	ORS 684.020
Pennsylvania	Licensure	PL Rules Sec. 12
Rhode Island	Licensure	GLRI 5-30-2
South Carolina	Licensure	SCCL 40-9-20

STATE	TYPE	CITATION
South Dakota	Licensure	SDCLA 36-5-2
Tennessee	Licensure	TCA 63-4-107
Texas	Licensure	TCSA Sec. 5a
Utah	Licensure	UCA 58-12-51
Vermont	Licensure	VSA Part 3.1
Virginia	Licensure	VC 54-274
Washington	Licensure	RCW 18.25.010
West Virginia	Licensure	WVC 30-16-1
Wisconsin	Licensure	WSA 446.02
Wyoming	Licensure	WS 33-10-105
D.C.	Licensure	DCCA 2-1302
Puerto Rico	Licensure	

Source: HPLIS/CSG; December 31, 1984

TABLE V-2

CHIROPRACTOR
ORGANIZATIONAL PATTERN OF STATE REGULATORY BOARDS

STATE	NAME OF BOARD/DEPARTMENT	NUMBER OF BOARD MEMBERS PROF.	PUB.	OTHER	TOTAL	CITATION
Alabama	St. Bd. of Chiropractic Examiners	5	0	0	5	Rule 190-x-1-.02
Alaska	Bd. of Chiropractic Examiners Dept. of Commerce & Econ. Devel.	4	1	0	5	AS 08.20.020
Arizona	Board of Chiropractic Examiners	3	2	0	5	ARS 32.901
Arkansas	St. Bd. of Chiropractic Examiners	5	0	0	5	ARS 72-418
California	St. Bd. of Chiropractic Examiners	5	2	0	7	Bus & Prof. Code 1000-1
Colorado	St. Bd. of Chiropractic Examiners Dept. of Regulatory Agencies	4	1	0	5	CRS 12-33-103
Connecticut	St. Bd. of Chiropractic Examiners Dept. of Health Services	2	1	0	3	CGS 20-25
Delaware	Bd. of Chiropractic Examiners Div. of Business & Occ. Regulation	5	2	0	7	D.C.702
Florida	Bd. of Chiropractic Examiners Dept. of Professional Regulation	5	2	0	7	FS 460.404
Georgia	Board of Chiropractic Examiners	5	1	0	6	OCGA 43-9-2
Hawaii	St. Bd. of Chiropractic Examiners Dept. of Commerce & Consumer Affairs	3	2	0	5	HRS 442-3
Idaho	St. Bd. of Chiropractic Physicians	4	1	0	5	IC 54-706

STATE	NAME OF BOARD/DEPARTMENT	NUMBER OF BOARD MEMBERS PROF.	PUB.	OTHER	TOTAL	CITATION
Illinois	Dept. of Registration & Education Medical Practice Exam. Committee	1	0	6a	7	111 IRS 4436
Indiana	Bd. of Chiropractic Examiners	4	1	0	5	IC 25-10-1-1.5
Iowa	Bd. of Chiropractic Examiners/ Dept. of Health	5	2	0	7	IAC 470-141.2(151)
Kansas	State Board of Healing Arts	3	1	9b	13	KS 65-2815
Kentucky	St. Bd. of Chiropractic Examiners	5	0	0	5	KRS 312.025
Louisiana	Bd. of Chiropractic Examiners	6	0	2c	8	LRS 2802
Maine	Bd. of Chiropractic Exam. & Regis.	5	1	0	6	32 MRSA 501
Maryland	St. Bd. of Chiropractic Examiners	3	1	0	4	MCA 3-202
Massachusetts	Bd. of Registration of Chiropractors	6	1	0	7	Chiropractic Official Directory
Michigan	Bd. of Chiropractic Examiners	5	2	0	7	MS 333.16421
Minnesota	St. Bd. of Chiropractic Examiners	5	2	0	7	MS 148.03
Mississippi	St. Bd. of Chiropractic Examiners	5	0	1d	6	MC 73-6-3
Missouri	St. Bd. of Chiropractic Examiners	5	1	0	6	RSMO 331.091
Montana	Board of Chiropractors Dept. of Commerce	3	1	0	4	MT Code 2-15-1847
Nebraska	Bd. of Examiners in Chiropractic	3	0	0	3	Chiropractic Official Directory
Nevada	St. Bd. of Chiropractic Examiners	5	1	0	6	NRS 634.020
New Hampshire	Bd. of Chiropractic Examiners	4	1	0	5	NHRSA 316:2

STATE	NAME OF BOARD/DEPARTMENT	NUMBER OF BOARD MEMBERS PROF.	PUB.	OTHER	TOTAL	CITATION
New Jersey	St. Bd. of Medical Examiners Dept. of Law & Public Safety	1	2	12	15c	NJS 45:9-41.13
New Mexico	Chiropractic Board	4	1	0	5	61-4-3 NMSA
New York	St. Bd. for Chiropractic/ Dept. of Education	4	1	3f	8	CLNYA 6553
North Carolina	St. Bd. of Chiropractic Examiners	6	1	0	7	NCGS 90-139
North Dakota	Bd. of Chiropractic Examiners	5	0	0	5	NDCC 43-06-03
Ohio	St. Bd. of Chiropractic Examiners	4	1	0	5	ORCA 4734.01
Oklahoma	Bd. of Chiropractic Examiners	3	1	0	4	OS 161
Oregon	St. Bd. of Chiropractic Examiners	4	1	0	5	ORS 684.130
Pennsylvania	St. Bd. of Chiropractic Examiners Dept. of Public Instruction	6	2	0	8	Chiropractic Official Directory
Rhode Island	St. Bd. of Examiners in Chiropractic St. Dept. of Health	2	0	1g	3	GLRI 5-30-2
South Carolina	Bd. of Chiropractic Examiners	7	1	0	8	SCCL 40-9-30
South Dakota	St. Bd. of Chiropractic Examiners	3	1	0	4	SDCL 36-5-3
Tennessee	St. Bd. of Chiropractic Exam.	5	0	0	5	TCA 63-4-102
Texas	Bd. of Chiropractic Examiners	6	3	0	9	TCSA 97-3(b)
Utah	Chiropractor Representative Cmte. Dept. of Business Regulation	3	0	0	3	UCA 58-12-51.5
Vermont	Bd. of Chiro. Examination & Regis.	3	0	0	3	R 1.3

STATE	NAME OF BOARD/DEPARTMENT	NUMBER OF BOARD MEMBERS PROF.	 PUB.	 OTHER	 TOTAL	CITATION
Virginia	St. Bd. of Medicine Dept. of Health Regulatory Boards	1	0	h		VC 54-282
Washington	St. Bd. of Chiro. Examiners Dept. of Licensing	3	0	0	3	RCW 18.25.015
West Virginia	Bd. of Chiropractic Examiners	3	0	1i	4	WVC 30-16-3
Wisconsin	Chiropractic Examining Board Dept. of Regulation and Licensing	4	2	0	6	440.01
Wyoming	Bd. of Chiropractic Examiners	3	0	0	3	WS 33-10-103
D.C.	Bd. of Chiropractic Examiners	3	2	0	5	
Puerto Rico	Bd. of Chiropractic Exam. of PR	3	0	0	3	Act. #493

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Five shall be physicians licensed to practice medicine, surgery, the other shall possess the degree of doctor of osteopathy.
b. Five shall hold a degree of doctor of medicine; three shall hold a degree of doctor of osteopathy; one shall be a registered podiatrist.
c. Practicing physicians licensed by the LA St. Bd. of Medical Sciences.
d. The executive office, or his/her designee, of the State Board of Health.
e. One podiatrist, one doctor of osteopathy, one Ph.D. and nine M.D.'s.
f. One doctor of medicine, one doctor of osteopathy, one educator with a doctorate in anatomy, physiology, chemistry or microbiology.
g. One board member should be a medical doctor.
h. Board shall consist of one medical physician from each congressional district, 1 osteopath, 1 podiatrist and 1 clinical psychologist from the state at large.
i. Director of health _ex officio_.

TABLE V-3

CHIROPRACTOR
FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	ISSUES LICENSE	APPROVES/ACCREDITS EDUCATION	PROMULGATES REGULATIONS
Alabama	Board	Board	Board
Alaska	Board	Board	Board
Arizona	Board	Board or a	Board
Arkansas	Board	Board or a	Board
California	Board	a or d or e	Board
Colorado	Board	Board/a	Board
Connecticut	Department of Health Services	a or b	
Delaware	Board	b	Board
Florida	Department of Professional Reg.	f or c or g	Board
Georgia	Board	a or h	Board
Hawaii	Board	f or b	Board
Idaho	Board	Board/a	Board
Illinois			
Indiana	Department of Regis. & Educ.	Board/b	Board
Iowa	Board	Board/a or b	Board
Kansas	Board	Board	Board
Kentucky	Board	Board	Board
Louisiana	Board	a or i	Board
Maine	Board	Board or j	Board
Maryland	Board	Board & a	Board
Massachusetts	Board	Board	Board
Michigan	Board	Board	Board
Minnesota	Board	a or b	Board
Mississippi	Board	Board/a	Board
Missouri	Board	Board/a	Board
Montana	Department (k)	Board/a	Board
Nebraska	Dept. of Health	Dept. of Health	Board
Nevada	Board	a	Board
New Hampshire	Board	Board	Board
New Jersey	Board	Board	Board
New Mexico	Board	a	Board
New York	St. Ed. Dept.	a	Ed. Dept.
North Carolina	Board	Board/a	Board
North Dakota	Board	a	Board
Ohio	Board	Board/a	Board

STATE	ISSUES LICENSE	APPROVES/ACCREDITS EDUCATION	PROMULGATES REGULATIONS
Oklahoma	Board	Board/a	Board
Oregon	Board	Board/a	Board
Pennsylvania	Board	Board	Board
Rhode Island	Dept. of Health (k)	Dept. of Health	Board
South Carolina	Board	a	Board
South Dakota	Board	Board	Board
Tennessee	Board	a	Board
Texas	Board	Board	Board
Utah	Div. of Regis.	Div. of Regis./b	Board
Vermont	Board	f	Board
Virginia	Board	a	Board
Washington	Dir. of Lic.	Board	Board
West Virginia	Board	Board/j	Board
Wisconsin	Board	Board/a	Board
Wyoming	Board	Board	Board
D.C.	Board	a	Board

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Accrediting Commission of the Council on Chiropractic Education, or its successor.
b. Accrediting agency recognized by the US Dept. of Education.
c. Council on Post Secondary Accreditation.
d. A chiropractic school & college accrediting agency employing equivalent standards as determined by the Board.
e. Accrediting agency recognized by the US Commissioner of Education.
f. Accrediting agency approved by US Office of Education.
g. Department, provided the Department applies the same standards used by the Office of Education which are applicable to Florida when approving an agency.
h. Or a college which meets equivalent standards thereof.
i. The Association of Chiropractic Colleges.
j. An accrediting agency approved by the US Dept. of Health, Education and Welfare.
k. With recommendation of the Board.

TABLE V-4

CHIROPRACTOR
ENFORCEMENT FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	CITATION	SUSP.	REVOKE	RESTR. LIC.	CENS.	REPR.	PROB.	FINES	OTHER
Alabama	34-24-169	x	x					b	c
Alaska	AS08-20.175	x	x	x	x	x	x		a,c
Arizona	ARSA 32.924	x	x		x		x	b	c
Arkansas	AS72-441	x	x						c
California	CBPC 1000-10	x	x			x	x		c
Colorado	CRS 12-33-117	x	x						c
Connecticut	CGS								g
Delaware	DCA 24-712	x	x		x	x	x		a,1
Florida	FS460.413	x	x			x	x		i,d,a
Georgia	OCG 43-9-12		x						c,g
Hawaii	HRS 442-9	x	x	x			x		c,a
Idaho	IC54-707	x	x						
Illinois	111 IRS-4433	x	x				x		
Indiana	IC 25-10-1-65	x	x	x	x	x	x		a
Iowa	IC470-141.22	x	x	x			x	h	e
Kansas	ICSA 100-16-1	x	x	x					
Kentucky	KRS 312-150	x	x						c
Louisiana	LRS 2804	x	x						c
Maine	32MRSA 503-A	x	x	x			x		k,j,c
Maryland	MCA	x	x			x			c
Massachusetts	ALM 96 & 93	x	x						c
Michigan	R33.16411	x	x						
Minnesota	MS 148.10	x	x	x					g,1
Mississippi	MCA	x	x						c
Missouri	RSMO 331-060	x	x						c
Montana	MCA37-12-323	x	x				x		
Nebraska									
Nevada	NRS634.190	x	x	x		x	x	m	
New Hampshire	NHRS 316:18	x	x	x		x			a
New Jersey		x	x	x			x		
New Mexico	NJSA 61-4-10	x	x						c
New York	CLNYA 6511	x	x	x	x	x	x	n	a,o,p
N. Carolina	NCGS90.154	x	x		x	x	x		c
North Dakota	NDCC 17-02-02		x						c
Ohio	ORCA 4734.10	x	x						c
Oklahoma	OS Sec. 50	x	x						c
Oregon	ORS684.100	x	x	x			x		c,e,q
Pennsylvania	PS Sec. 16	x	x						c
Rhode Island	GLRI5-30-13	x	x						c
S. Carolina	SCCL 40-9-30	x	x	x					c

STATE	CITATION	SUSP.	REVOKE	RESTR. LIC.	CENS.	REPR.	PROB.	FINES	OTHER
South Dakota	SDCLA 36-5-16	x	x			x			c
Tennessee	TCA 63-4-115	x	x						c
Texas	TCSA Sec.14	x	x			x	x		
Utah	UCA 58-12-52								
Vermont	505	x	x						
Virginia	VC 54-316	x	x		x	x	x		c
Washington	RCW18.25.050		x						c
West Virginia	WVC30-16-8	x	x						c
Wisconsin	WSA 446.03	x	x	x		x			c
Wyoming	WS 33-10-110	x	x						c
D.C.		x	x	x		x	x	m	
Puerto Rico		x	x						

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Board may require member to participate in C.E.
b. Board may fine a licensee a sum of money not to exceed $500.00.
c. Board may refuse to issue a license to an applicant.
d. Refuse to certify to the department an applicant for licensure.
e. Require chiropractor to submit to re-examination.
f. Require chiropractor to work under the supervision of another chiropractor.
g. Board may cause a licensee's name to be removed from the records in the office of the clerk of the superior court in any county.
h. Impose a civil penalty not to exceed $1,000.
i. Issue citation and warning.
j. Board may rehabilitate the licensee.
k. Board may refuse to renew.
l. Board may condition or qualify a licensee to practice chiropractic.
m. Impose a fine of not more than $5,000.
n. Impose a fine not to exceed $10,000.
o. Annulment of license or registration.
p. Require licensee to perform 100 hours of public service in a manner and a time as directed by the board.
q. Require the disciplined professional to pay the cost of the disciplinary hearing.

TABLE V-5

CHIROPRACTOR
EXAMINATION OF APPLICANTS

STATE	WRITTEN EXAM USED	ORAL	PRACTICAL	CITATION
Alabama	a,b			R.190-x-2-.05
Alaska	a	x	x	12-AAC-16.130
Arizona	a		x	ARSA 32-922
Arkansas	a		x	R2B
California	a	x	x	CBPC-1000-6
Colorado	a	x	x	CRS 12-33-112
Connecticut	b		x	CGS20-28
Delaware	c,d			24DCA 708
Florida	b		x	R 21D-11.03
Georgia	b or e		x	R100-3-06
Hawaii	a or b		x	HRS 442-6
Idaho	a			1C 54-709
Illinois	f			111 IRS 4414
Indiana	a	x	x	Official Directory
Iowa	a	x	x	1C470-141.13
Kansas	a			KSA 65-2829
Kentucky	a		x	KRS 312.115
Louisiana	a or b		x	LRS 36:2805
Maine	a			R5
Maryland	a			MCA 3-304
Massachusetts	a		x	112 ALM 94
Michigan	a			R338.12005
Minnesota	a		x	M.S. 148.06
Mississippi	a or b		x	MCA 73-6-13
Missouri	a		x	RSM.331.030
Montana	a			MCA 37-12.304
Nebraska	a			RSN 71-179
Nevada	a	x	x	NRS 634.070
New Hampshire	a			NHRSA 316.11
New Jersey	a			NJSA 45.9-41.2
New Mexico	a		x	61-4-6 NMSA
New York	b			R73.2b
North Carolina	a, b	x		R.0203g
North Dakota	a		x	R17-02-01-08
Ohio	a	x	x	R4734-1-09
Oklahoma	a		x	R303
Oregon	a			ORS684.050
Pennsylvania	a	x	x	PL.1182-10-1a
Rhode Island	g		x	GLRI 5-30-9
South Carolina	x			R 25-6

STATE	WRITTEN EXAM USED	ORAL	PRACTICAL	CITATION
South Dakota	a			SDCLA 36-5-12
Tennessee	a & b			TCA 63-4-110
Texas	x,h	May	x	R71.7-71.8
Utah	i			UCA 58-12-51-8
Vermont	x,h		x	R 3.3
Virginia	a			VC 54-297
Washington	a			RCW 18.25.030
West Virginia	a	x		WVC 30-16-5
Wisconsin	a		x	R 1.03
Wyoming	a		x	W.S 33-10-107
D.C.	a			DCCA 43-06-10

Source: HPLIS/CSG; December 31, 1984

Key:

a. Examination administered by the state board.
b. Examination administered by the National Board of Chiropractic Examiners.
c. Examination administered on a national basis.
d. Board shall administer a clinical exam.
e. Georgia chiropractic examination.
f. Examination administered by the department.
g. The division of Professional Regulation shall utilize the exam of the Federation of State Medical Boards of the U.S., Inc. (FLEX) or any other exam in the basic sciences subjects.
h. Examinees may be examined on the laws and board rules and regulations governing chiropractic in this state.
i. Approved and given at the direction of the Division of Registration.

TABLE V-6

CHIROPRACTOR
INITIAL REQUIREMENTS FOR LICENSE APPLICANTS

STATE	CITATION	EDUCATION	INTERN.	MORALS	AGE	CIT.
Alabama	CA 34-24-160	a	b	c		
Alaska	AS 08.20.120	a.d				
Arizona	ARSA 32-921	a		c		
Arkansas	AS 72-423	a,e		f	21	
California	CBPC 1000-5	a,d				
Colorado	CRS 12-33-111	a		c	21	
Connecticut	CGS sect. 11	a				
Delaware	DCA 707(a)	a		f		
Florida	FS 460.406	a,d			18	
Georgia	OCG 43-9-7	a,g		c		
Hawaii	HRS 442-2	a,d				
Idaho	IC 54-703	a				
Illinois	111 IRS 4423	a,d	12 mos.	c		
Indiana	IC 25-10-1-2	a,d			18	
Iowa	IC 470.11	a		c		
Kansas	Rules 100-6-2	a,d		c	legal age	
Kentucky	KRS 312.085	a,d				
Louisiana	LRS 2805	a,d		c	21	yes
Maine	MRSA 551	a,d		c	18	
Maryland	MCA 3-302	a,d		c		
Massachusetts	Rules 91	a,d		c	18	
Michigan	Rules 338.12003	a				
Minnesota	MS 148.06	a,d				
Mississippi	ALM 73-6-13	a,d				
Missouri	RSMO 331.030	a,e		c	21	
Montana	MCA 37-12-302	a,d				
Nebraska	RSN 71-179	a				
Nevada	NRS 634.090	a		c	21	
New Hampshire	NHRSA 316-9,10	a			18	
New Jersey	NJSA 45:9	a,d				
New Mexico	NMSA 61-4-4	a,d		c	majority	
New York	CLNYA 6554	a,e		c	21	
North Carolina	NCGS 90-143	a,d		c		yes
North Dakota	NDCC 17-02-01-01	a		c		
Ohio	ORCA 4734.05	a		c	21	
Oklahoma	OC 1649	a,g				
Oregon	ORS 684.040	a,d		c		
Pennsylvania	Pub. Law sect 8	a,h		c	21	
Rhode Island	GLRI 5-30-6	a,d		c	23	
South Carolina	SCCL 40-9-40	a,d				

STATE	CITATION	EDUCATION	INTERN.	MORALS	AGE	CIT.
South Dakota	SDCLA 36-5-8	a,d				
Tennessee	TCA 63-4-108	a,d		c		yes
Texas	TCSA sect. 10	d,i		c	18	
Utah	UCA 58-12-51.8	a,e		c	21	yes
Vermont	VSA 501	d,i		c	majority	
Virginia	VC 54-305	a		c	18	
Washington	RCW 18.25.020	a,d		c		
West Virginia	WVC 30-16-4	a,d		c	18	
Wisconsin		a,d				
Wyoming	WS 33-10-106	a,d				
D.C.	DCA 2-1324	a,d		c	18	
Puerto Rico	Sect. 6	a,d		c	majority	yes

Source: HPLIS/CSG; December 31, 1984

KEY:

1 An internship is defined as supervised work experience.
a Graduate of an accredited chiropractic program.
b During the final year at chiropractic college a student may be issued a limited course to practice chiropractic under the direct, on premises supervision of a licensed sponser.
c Good moral character
d Has successfully completed two years of study in a college of liberal arts or sciences.
e Has completed two years of college study in the field of science.
f Good moral character, not convicted of a felony, not an habitual user of intoxicants, drugs or hallucinatory preparations.
g A graduate of a four year standard college.
h Has completed one year of college credits in physics, chemistry and biology.
i A graduate of a bona fide, reputable, chiropractic school.

TABLE V-7

CHIROPRACTOR
SCHEDULE OF FEES

STATE	APPLICATION	EXAM*	RENEWAL	TEMPORARY	DUPLICATE	RECIPROCAL
Alabama	<$150		<$100		$10	$ 50
Alaska	$200	$ 50	$200	$50	$ 2	$200
Arizona	$100	$ 50	$ 50		**	$100
Arkansas	$ 75		<$ 85		$ 2	$ 75
California	<$100		<$150		$25	
Colorado						
Connecticut	$150					$150
Delaware***		$50	$10/Ann			$50
Florida	$150		$70/Bi			
Georgia	$100		$40/Bi		$5	$100
Hawaii***		$50	$15/Bi			
Idaho	$ 50	$100	$ 75			
Illinois	$150	$ 10	$ 20	$50	$10	
Indiana	$100					
Iowa	$100		$100/Bi		$10	$100
Kansas	$130	$ 40	$ 50	$30	$15	$130
Kentucky	<$100		<$ 30			<$100
Louisiana***	$50	$50	$50/Ann			$150
Maine	$ 40		<$ 50			$ 40
Maryland	$ 25		$ 25			$ 25
Massachusetts	$ 25		Determined Annually			Determined Annually
Michigan	$100		$ 45	$25		$100
Minnesota			$ 50			
Mississippi	<$ 75	<$ 50	$ 75			<$ 75
Missouri***	$10	$15	$10/Ann			$100
Montana	$125	$125	$ 50	a		($125?)
Nebraska	<$300		<$100			
Nevada	$100		<$200			$100
New Hampshire***		$35	$20/Bi			$75
New Jersey	$150		$ 60			$100
New Mexico	$ 50	<$100	$ 25			$125
New York	$100		$60/Bi			$ 65
North Carolina	$100	$100	<$100			$100
North Dakota***		$50	$25/Ann			
Ohio	$100		$ 50			$100
Oklahoma	$150		$ 35			$150
Oregon	$ 15	<$ 80			$ 50	
Pennsylvania	$ 50	$ 25	$10/Bi			
Rhode Island		$ 50	$ 25			$ 50

STATE	APPLICATION	EXAM*	RENEWAL	TEMPORARY	DUPLICATE	RECIPROCAL
South Dakota	<$100		<$100			<$100
Tennessee	$ 25	$ 75	$ 25	$ 50		
Texas		<$120	<$120			<$120
Utah	$ 25					$ 10
Vermont	$ 50		$ 10			$ 75
Virginia***		$175	$10/Ann			$175
Washington	$250	$250	$125		$ 5	$200
West Virginia	$ 25		$ 25			$100
Wisconsin	$ 50		$35/Bi	$ 10	$ 5	$ 50
Wyoming	<$200					<$ 50
D.C.	<$200		<$200			
Puerto Rico***	$20	$15				$20

Source: HPLIS/CSG; December 31, 1984

KEY:

< Equal to or less than.

* When the "Exam" column is blank, the application fee covers the cost of the exam.

** Licensure fee. This fee is not specified in the statutes. Instead the law states that necessary fees not provided for in the statute should not exceed the costs of rendering such services.

*** Information taken from document prepared by C.L.E.A.R. in December 1982 and may not be the current fees.

a. No temporary licenses will be issued before the $125 application fee is paid. No additional fees are assessed for a temporary license.

TABLE V-8

CHIROPRACTOR
RECIPROCITY AND ENDORSEMENT

STATE	TYPE	CONDITIONS	CITATION
Alabama	Endorsement	t	Rule 190-x-2-08
Alaska	Endorsement	a	SEC AS 08.20.140
Arizona	Reciprocity	a	ARSA 32-922.01
Arkansas	Reciprocity	a	AS 72.427
California	Not Available		
Colorado	Endorsement	a,f,o,p	CRS 12-33-113 & Sec. 11c
Connecticut	Endorsement	a,m	CGS Sec. 20-27c
Delaware	Endorsement	a,h,k	DCA 711
Florida	None		
Georgia	Endorsement	a	OCG 43-9-9
Hawaii	Endorsement	u	HRS 442-6
Idaho	Endorsement	a,f,g	IC 54-710
Illinois	Endorsement	a	111 IRS 4426-13
Indiana	Endorsement	a	IC 25-10-1-5
Iowa	Reciprocity	a,b,c,d,e	IC 141.14(2)
Kansas	Endorsement	a	KSA 100-8-1
Kentucky	Reciprocity	a	KRS 312.105
Louisiana	Endorsement	a	LRS: 2806
Maine	Reciprocity	a	Rule 13
Maryland	Endorsement	a	MCA 3-305
Massachusetts	Reciprocity	a,g	ALM 92
Michigan	Endorsement	a,l,k,s,t	R-338.12004
Minnesota	Endorsement	a,m	MS 148.06
Mississippi	Reciprocity	a	MCA 30-16-6
Missouri	Endorsement	a,j	RSMo 331.030
Montana	Endorsement	a	MCA 37-12-305
Nebraska	Endorsement	a,f	RSN 71-181
Nevada	Reciprocity	a	NRS 634-110 #2
New Hampshire	Endorsement	a	NHRSA 316.15
New Jersey	Endorsement	a	NJSA 45.9-41.3
New Mexico	Endorsement	a	NMSA 61-4-8
New York	None		
North Carolina	Endorsement	i,j,f,a	NCGS 90-143.1
North Dakota	Not Available		
Ohio	Endorsement	c	ORCA 4734-1-08
Oklahoma	Endorsement	a,m,g	OS 164b
Oregon	Endorsement	a	ORS 684.060
Pennsylvania	Reciprocity	a,v	PL 5.1
Rhode Island	Reciprocity	c,a	GLRI 50-30-7
South Carolina	Reciprocity	a,n	SCCL 40-9-80

STATE	TYPE	CONDITIONS	CITATION
South Dakota	Endorsement	a	SDCLA 36-5-13
Tennessee	Endorsement	a,n	TCA 63-4-111
Texas	Endorsement	a,f,k,p	TCSA Sec.9
Utah	Endorsement	a,p	UCA 58-12-33
Vermont	Endorsement	h,f,a	Rule 504
Virginia	Endorsement	a,v	Rules 4.1
Washington	Endorsement	a,q	RCW 18-25-040
West Virginia	Reciprocity	a	WVC 30-16-6
Wisconsin	None		VSA Chir. 1.07
Wyoming	Endorsement	a	WS 33-10-115
D.C.	Endorsement	a,j	DCCA 2-1322

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Requirements for licensure at the date of the applicants license must be essentially equivalent to the state requirements in which the individual is applying.
b. If any state places limitations or restrictions upon licentiates of this state, the same limitations or restrictions may be imposed upon licentiates from such state applying for admission to practice in this state by reciprocity.
c. The statement made in the application must be reviewed and verified by the state examining board issuing the original license, certifying under seal as to the subjects in which the applicant was examined, the grade obtained in each subject and the general average attained in the entire examination.
d. The applicant must have had two years of full-time practice before applying for license by reciprocity.
e. No reciprocal license or license by endorsement shall be issued to an applicant who has failed the examination more than two times in another state.
f. Proof must be submitted that the applicant holds a valid, unrevoked unsuspended license to practiced chiropractic in a U.S. state, territory, or in Canada.
g. Each applicant shall be personally interviewed by the board or a designated committee of the board to specifically review the applicants qualifications and professional credentials and to demonstate to the board that the applicant possesses the arts and skills of chiropratic adjusting.
h. Must have been in active practice for five years.
i. The applicant is currently an active, competent practitioner and is in good standing.
j. Applicant has practiced at least one year of the last three.
k. No disciplinary proceedings or unsolved complaint is pending anywhere at the time a license is to be issued by this state.
l. Provide transcripts of grades from all colleges and chiropractic schools attended.
m. Must pass a practical exam.

n. Must have been in active practice for one year in the state of their license.

o. Applicant must have been in active practice at least three of the last five years in another U.S. state.

p. Applicant has not been convicted of a crime which would be grounds for the refusal, suspension, or revocation of a license, suspension, or revocation of a license to practice chiropractic in this state if committed in this state.

q. Persons applying for licensure by endorsement must undergo an examination by the board in principles of chiropractic, x-ray, and adjusting.

r. The board has no authority to establish reciprocal agreements with any other state board of chiropractic examiners.

s. Applicant must have passed both parts of the national exam.

t. The applicant must have previously passed an examination in another state that is essentially equivalent to this state's exam. It should include 7 parts. Any part(s) that were failed or never taken must be retaken and passed.

u. For each year of actual practice as a licensed chiropractic in another state the applicant shall be given a credit of 1/2 percent up to 20 years maximum to be added to each score for each subject area.

v. Must have been licensed in another state for ten years or more and application must be accompanied by two letters of recommendation.

w. The applicants must hold valid licenses.

TABLE V-9

CHIROPRACTOR CONTINUING EDUCATION REQUIREMENTS

STATE	REQUIRED	EXTENT OF EDUCATION	CITATION
Alabama	Yes	15 hrs.annually	Rule 190-x-2-11
Alaska	No		
Arizona	No		
Arkansas	Yes	24 hrs. annually	AS 72-425
California	Yes		Article 6, Sec. 355
Colorado	Yes	25 hrs. annually	CRS 12-34-114
Connecticut	No		
Delaware	Yes	24 hrs. biennually	
Florida	Yes	12 hrs. annually	R 210-13.01
Georgia	Yes	2-day education program	OCG 43-9-11
Hawaii	No		
Idaho	Yes	Not specified	Regs. Sec. F
Illinois	No		
Indiana	Yes	12-day seminar	IC 25-10-1-6
Iowa	Yes	20 hrs. annually	K 141.62(1)
Kansas	Yes	50 hrs. annually	KSA 100-15-2
Kentucky	Yes	Annually attend an ed. prog.	KRS 312.175
Louisiana	Yes	12-day seminar	LRS 2810
Maine	Yes	2 education programs	32 MRSA 553
Maryland	Yes	(in regs)	
Massachusetts	Yes	12 hrs. annually	ALM 96
Michigan	Yes	24 hr. biennually	R338.12008
Minnesota	No		
Mississippi	Yes	20 hrs. per year	ALM 2500.1200
Missouri	Yes	Not less than 12 hrs.	RSMo 331.050
Montana	Yes	1 post-grad. educ. program	MCA 37-12-307
Nebraska	Yes	15 hrs. annually	RSN 71-179.01
Nevada	Yes	1 2-day education seminar	NRS 634-140
New Hampshire	Yes	1 seminar[a]	
New Jersey	No		
New Mexico	Yes		
New York	No		
North Carolina	Yes	2 days of education session	NCGS 90-155
North Dakota	Yes		NDCC 43-06-13
Ohio	Yes	1 2-day education seminar	ORCA 4734.07
Oklahoma	Yes	2 days education program	ORS 684.092
Oregon	Yes	An approved program	ORS 684.092
Pennsylvania	Yes	An education conference	PL Sec. 14
Rhode Island	Yes	12 hrs. annually	Regs. 2.0
South Carolina	Yes	12 hrs. annually	Reg. 25.9

STATE	REQUIRED	EXTENT OF EDUCATION	CITATION
South Dakota	Yes		
Tennessee	Yes	12 hrs. annually 63-4-112	Regs. 0260-2.05
Texas	Yes	2 days of CE	TCSA Sec. 8b
Utah	No		
Vermont	Yes	2-day educational program	Rules Sec. 4.5
Virginia	No		
Washington	Yes	25 hrs. each 3 yrs.	RCW 18.25.070
West Virginia	Yes	24 hrs. annually	Rule 12
Wisconsin	Yes	24 hrs. each 2 yrs.	R 3.08
Wyoming	Yes	12 hrs. annually	33 10 113
D.C.	Yes	12 hrs. annually	DCCA 43-06-13

Source: HPLIS/CSG; December 31, 1984

KEY:

a Each applicant must attend one seminar annually that is approved by the International Chiropractors Association or the American Chiropractors Association.

CHAPTER VII

STATE REGULATION OF LICENSED PRACTICAL NURSES

LICENSED PRACTICAL NURSE

Type of State Regulation All of the states, the District of Columbia and Puerto Rico license practical nurses. (See Table VI-1).

Scope of Practice Each state identifies a scope of practice to define areas in which the licensed practical nurse (LPN) can practice. An example reads:

> The performance, for compensation, of acts designed to promote and maintain health, prevent illness and injury and provide care utilizing standardized procedures and the nursing process, including administering medication and treatments, under the direction of a licensed professional nurse or a licensed or otherwise legally authorized physician or dentist. Such practice requires basic knowledge of the biological, physical and behavioral sciences and of nursing skills but does not require the substantial specialized skill, independent judgment and knowledge required in the practice of professional nursing. Additional acts requiring appropriate education and training may be performed under emergency or other conditions which are recognized by the nursing and medical profession as proper to be performed by a licensed practical nurse.

Organization of State Regulatory Bodies and Functions All of the states regulate licensed practical nurses through a board of nursing. Six states (i.e. CA, GA, LA, TX, WA and WV) and the District of Columbia have a separate board to regulate licensed practical nurses exclusively. The other states have nursing boards which regulate both LPN's and RN's. None of the state boards are composed exclusively of LPNs. Only two state boards have a majority of LPNs as members. Twenty states specify one or more members must be engaged in education. Forty-three boards have one or more public members. The remaining members are most frequently registered nurses and physicians. (See Table VI-2).

Nearly every state allows the board to issue licenses, promulgate rules and regulations, and approve or accredit the educational programs. (See Table VI-3).

All but Arkansas allow the board to revoke and/or suspend a nurses' license as a disciplinary sanction. Arkansas uses only supervision. See Table VI-4 for other sanctions available to the board.

All of the states require written examinations for practical nurse licensure. Fifty states utilize the National Council of Licensure Examination for Practical Nurses, although not every state specifies this exam in its law. In addition to the written exam, a few states may also require an oral or practical examination but none do so. (See Table VI-5).

Requirements for Licensure All states require that the practical nurse have completed a course of study in an accredited school for practical or vocational nursing. Most of the states require that the nurse be of good moral character. For specific character requirements, as well as age requirements see Table VI-6.

Continuing Education Requirements Thirteen states require the LPN to complete continuing education requirements as a prerequisite for license renewal. See Table VI-9 for detailed information.

Interstate Recognition of Credentials All states endorse the license of practical nurses from other states once the nurse has established that certain conditions have been met. Table VI-8 sets out those conditions.

Fee Schedule Fee levels for six types of fees are shown in Table VI-7.

TABLE VI-1

LICENSED PRACTICAL NURSE

TYPE OF STATE REGULATION

STATE	TYPE	CITATION
Alabama	Licensure	CA 34-21-20
Alaska	Licensure	AS 08.68.160
Arizona	Licensure	ARS 32-1601.1
Arkansa	Licensure	AS 72-745
California	Licensure*	Bus.& Prof. Code 6.5-2859
Colorado	Licensure	CRS 12-38-103(8)
Connecticut	Licensure	CGS 20-92
Delaware	Licensure	DCA 24-1902(c)
Florida	Licensure	FS 464.003(5)
Georgia	Licensure	OCG 43-26-32(a)
Hawaii	Licensure	HRS 457-1
Idaho	Licensure	IC 54-1401
Illinois	Licensure	111 IRS 3405(4)
Indiana	Licensure	IC 25-29-1-1(d)
Iowa	Licensure	IC 152.1(3)
Kansas	Licensure	KSA 65-113(f)
Kentucky	Licensure	KRS 314.011(2)
Louisiana	Licensure	RS 37:961(4)
Maine	Licensure	32 MRSA 2101
Maryland	Licensure	ACM 7-101(c)
Massachusetts	Licensure	ALM 112 section 74a
Michigan	Licensure	R 338.1222(2)
Minnesota	Licensure	MS 148.29(3)
Mississippi	Licensure	MCA 73-15-3
Missouri	Licensure	RSMo 335-016(5)
Montana	Licensure	MCA 37-8-101(2)
Nebraska	Licensure	RS 71-1,132.04
Nevada	Licensure	NRS 632.260
New Hampshire	Licensure	RSA 326-B:15(II)
New Jersey	Licensure	RS 45:11-37
New Mexico	Licensure	NMSA 61-3-5
New York	Licensure	CLNYA 6903
North Carolina	Licensure	GSNC 90-171.43
North Dakota	Licensure	NDCC 43-12.1-03
Ohio	Licensure	ORCA 4723.37
Oklahoma	Licensure	59 OS 567.14
Oregon	Licensure	ORS 678.021
Pennsylvania	Licensure	49 Pa. Code 21.141
Rhode Island	Licensure	GLRI 5-34-2
South Carolina	Licensure	SCCL 40-33-710

STATE	TYPE	CITATION
South Dakota	Licensure	SDLA 36-9-68
Tennessee	Licensure	TCA 63-7-120
Texas	Licensure*	Rules 231.101
Utah	Licensure	UCA 58-31-2
Vermont	Licensure	VSA 1584
Virginia	Licensure	CV 54-367.35
Washington	Licensure	RCW 18.78.170
West Virginia	Licensure	WVC Bd. Rule Sect. 11(1)
Wisconsin	Licensure	WSA 441.10
Wyoming	Licensure	WS 33-21-145
D.C.	Licensure	D.C. Code 2-1702.8
Puerto Rico	Licensure	Act 121 Section 20

Source: HPLIS/CSG; December 31, 1984

KEY:

* In CA and TX LPN's are referred to as Licensed Vocational Nurse, L.V.N.

TABLE VI-2

LICENSED PRACTICAL NURSE

ORGANIZATIONAL PATTERN OF STATE REGULATORY BOARDS

STATE	NAME OF BOARD & DEPARTMENT	NUMBER OF BOARD MEMBERS PROF.	PUB.	OTHER	TOTAL	CITATION
Alabama	Bd. of Nursing	4	0	6a	10	CA 34-21-2
Alaska	Bd. of Nursing Dept. of Commerce & Econ. Dev.	1	2	4a*	7	AS 08.68.010
Arizona	Bd. of Nursing	2	2	5a	9	ARSA 32-1602(A)
Arkansas	Bd. of Nursing	3	1	9b	13	AS 72-747
California	Bd. of Voc Nurse & Psych Tech Exam. Bd. Dept. of Consumer Affairs	3	5	3c	11	Chap 6.5-2841
Colorado	Bd. of Nursing Dept. of Regulatory Agencies	3	2	6a***	11	CRS 12-38-104
Connecticut	Bd. of Examiners for Nursing Dept. of Health Services	2	4	5a***	11	CGS 20-88
Delaware	Bd. of Nursing	4	2	5a	11	DCA 24-1903(A)
Florida	Bd. of Nursing Dept. of Professional Regulation	2	2	5d	9	FS 464.004
Georgia	Bd. of Examiners of LPN's	6	1	0	7	OCG 43-26-31
Hawaii	Bd. of Nursing Dept. of Commerce & Consumer Affairs	2	2	5a	9	HRS 457-3
Idaho	Bd. of Nursing Dept. of Self Governing Agencies	2	1	4a	7	IC 54-1403
Illinois	Bd. for Opinions on Prof. Nursing Dept. of Registration & Education	0	0	8e	8	111 IRS 3406
Indiana	Bd. of Nurses Registration & Ed.	2	1	5a*	8	IC 25-23-1-2
Iowa	Bd. of Nursing Dept. of Health	1	2	4a***	7	IC 147.14
Kansas	Bd. of Nursing	2	2	7f	11	KSA 74-1106
Kentucky	Bd. of Nursing	3	1	7a	11	KRS 314.121
Louisiana	Bd. of Practical Nurse Examiners Dept. of Health & Human Resources	4	0	7g	11	LRS 37:962

		NUMBER OF BOARD MEMBERS				
STATE	NAME OF BOARD & DEPARTMENT	PROF.	PUB.	OTHER	TOTAL	CITATION
Maine	Bd. of Nursing	1	1	5a*	7	32 MRSA 2151
Maryland	Bd. of Examiners of Nurses	3	2	6***	11	MCA 7-202
Massachusetts	Bd. of Registration in Nursing	2	1	5a***	8	Chap.112 Sec.13
Michigan	Bd. of Nursing Dept. of Licensing & Regulation	3	2	9a***	14	Pub. Health Code Sec 17221
Minnesota	Bd. of Nursing	3	3	5a**	11	MS 148.181
Mississippi	Bd. of Nursing	4	1	7h**	12	MCA 73-15-9
Missouri	Bd. of Nursing	2	1	5a	8	VAMS 335.021
Montana	Bd. of Nursing Dept. of Commerce	3	2	4a*	9	MCA 2-15-1844
Nebraska	Bd. of Nursing Dept. of Health	2	1	7a****	10	RS 71-1,132.07
Nevada	Bd. of Nursing	2	1	4a	7	NRS 632.030
New Hampshire	Bd. of Nurse Ed.& Nursing Regist.	1	1	5a***	7	RSA 326 B-3
New Jersey	Bd. of Nursing Dept. of Law and Public Safety	2	1	7a	10	RS 45:11-24
New Mexico	Bd. of Nursing	2	1	4a	7	NMSA 61-3-8
New York	Bd. of Nursing Dept. of Education	4	2	11a	17	CLNYA 6904/6508
North Carolina	Bd. of Nursing	4	2	9a***	15	GSNC 90-171.21
North Dakota	Bd. of Nursing	3	1	5a	9	Rules 54-01-01-0
Ohio	Bd. of Nursing Ed.& Nurse Regist.	3	0	5a*	8	ORCA 4723.01
Oklahoma	Bd. of Nurse Regist. and Nursing Ed.	3	0	5a	8	OS 567.4
Oregon	Bd. of Nursing	2	1	6a	9	ORS 678.140
Pennsylvania	Bd. of Nurse Exam. of the Commonwealth Dept. of State	2	2	6i	10	71 PS 128
Rhode Island	Bd. of Nurse Regist. & Nursing Ed.	2	0	7a****	9	GLRI 5-34-4
South Carolina	Bd. of Nursing	2	1	4a	7	CLSA 40-33-210
South Dakota	Bd. of Nursing	3	2	6a**	11	SDLA 36-9-5

STATE	NAME OF BOARD & DEPARTMENT	NUMBER OF BOARD MEMBERS				CITATION
		PROF.	PUB.	OTHER	TOTAL	
Tennessee	Bd. of Nursing	3	1	5a	9	TCA 63-7-202
Texas	Bd. of Vocational Nurse Exam.	7	2	3	12	Nurse Practice Act Sec. 5
Utah	Bd. of Nursing Dept. of Business Regulation	3	1j	9a****	13	UCA 58-31-5
Vermont	Bd of Nursing	2	2	4a	8	VSA 1573
Virginia	Bd. of Nursing	2	0	5a	7	VC54-367.3
Washington	Bd. of Practical Nursing Dept. of Licensing	2	1	2a	5	RCW 18.78.020
West Virginia	Bd of Exam. for LPN's	2	1	4	7	WVC 30-7A-5
Wisconsin	Bd. of Nursing	2	2	5a	9	
Wyoming	Bd. of Nursing Dept. of Regulation and Licensing	2	1	4a*	7	WS 33-21-121
D.C.	Practical Nurses' Examining Bd. Dept. of Consumer & Regulatory Affairs	3	0	4a	7	
Puerto Rico	Sub Bd. of the Bd. of Nurse Exam.	1	0	2a	3	Act 121 Sec 2

Source: HPLIS/CSG; December 31, 1984

KEY:

* One member engaged in education
** Two members engaged in education
*** Three members engaged in education
****Four members engaged in education

a. RN's
b. Six RN's & three licensed psychiatric technician nurses
c. Two psychiatric technicians; one LVN or RN
d. RN's, including at least one nurse practitioner
e. Three physicians; three RN's; two chief executive officers of hospitals
f. Five RN's and two licensed mental health technicians
g. Two RN's; five licensed physicians
h. Six RN's; one licensed physician
i. Five are RN's and one is the Commissioner of Professional and Occupational Affairs
j. A vocational educator

TABLE VI-3

LICENSED PRACTICAL NURSE

FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	ISSUE LICENSE	APPROVE/ACCREDIT EDUCATION	PROMULAGATE REGULATIONS
Alabama	Board	Board	Board
Alaska	Board	Board	Board
Arizona	Board	Board	Board
Arkansas	Board	Board	Board
California	Board	Board	Board
Colorado	Board	Board	Board
Connecticut	Department	Board	Department[b]
Delaware	Board	Board	Board
Florida	Department	Board	Board
Georgia	Board	Board	Board
Hawaii	Board	Board	Board
Idaho	Board	Board	Board
Illinois	Department	Department	Department
Indiana	Board	Board	Board
Iowa	Board	Board	Board
Kansas	Board	Board	Board
Kentucky	Board	Board	Board
Louisiana	Board	Board	Board
Maine	Board	Board	Board
Maryland	Board	Board	Board
Massachusetts	Board	Board	Board
Michigan	Board	Board	Board
Minnesota	Board	Board	Board
Mississippi	Board	Board[a]	Board
Missouri	Board	Board	Board
Montana	Board	Board	Board
Nebraska	Board	Board	Board
Nevada	Board	Board	Board
New Hampshire	Board	Board	Board
New Jersey	Board	Board	Board
New Mexico	Board	Board	Board
New York	Department	Department	Department
North Carolina	Board	Board	Board
North Dakota	Board	Board	Board
Ohio	Board	Board	Board
Oklahoma	Board	Board	Board
Oregon	Board	Board	Board
Pennsylvania	Board	Board	Board
Rhode Island	Administrator of Prof. Regist.[b]	Board	Board
South Carolina	Board	Board	Board[d]

STATE	ISSUE LICENSE	APPROVE/ACCREDIT EDUCATION	PROMULAGATE REGULATIONS
South Dakota	Board	Board	Board
Tennessee	Board	Board	Board
Texas	Board	Board	Board
Utah	Division of Registration b	Division of Registration b	Board
Vermont	Board	Board	Board
Virginia	Board	Board	Board
Washington	Department b	Board	Board
West Virginia	Board	Board	Board
Wisconsin	Board	Board	Board
Wyoming	Board	Board	Board
D.C.	Department	Department	Department
Puerto Rico	Board	Board of Vocational Education	Board

Source: HPLIS/CSG; December 31, 1984

KEY:

a A program approved by the State Department of Education or one approved by a legal accrediting agency of another state or country which is satisfactory to the Mississippi Board of Nursing.

b Recommendation of the Board required.

TABLE VI-4

LICENSED PRACTICAL NURSE

ENFORCEMENT FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	CITATION	SUSPEND	REVOKE	RESTRICT LICENSE	CENSURE	REPRIMAND	PROBATION	FINE	OTHER
Alabama	CA 34-21-25	x	x						b
Alaska	AS 08.68.275	x	x	x	x	x	x		a
Arizona	ARS 32-1663	x	x		x		x		b
Arkansas	AS 72-7600	x							b
California	CBPC 2875	x	x				x		b
Colorado	CRS 12-38-117	x	x			x	x		a
Connecticut	CGS 20-99	x	x						c
Delaware	DCA 24-1922(B)	x	x	x	x		x		a,b
Florida	FS 464.018	x	x			x	x	x	a,c,e,f
Georgia	OCG 43-26-36(b)	x	x	x		x			f
Hawaii	HRS 457-12	x	x						b
Idaho	IC 54-1412	x	x	x					
Illinois	111 IRS 3420	x	x						
Indiana	IC 25-23-1-25.1	x	x	x	x	x	x		
Iowa	IC 152.10	x	x	x			x		c
Kansas	KSA 65-1120	x	x	x					
Kentucky	KRS 314.091	x	x	x			x		c
Louisiana	RS 37:969	x	x						
Maine	32 MRSA 2105.2	x	x						
Maryland	ACM 7-313	x	x			x	x		
Massachusetts	ALM Chap 112	x	x						
Michigan	Pub.H.Code 16226	x	x	x		x	x	x	
Minnesota	MS 148.297	x	x	x					b
Mississippi	MCA 73-15-29	x	x	x		x	x	x	b,e,f
Missouri	RSMo 335.066	x	x		x		x		

RESTRICT

STATE	CITATION	SUSPEND	REVOKE	LICENSE	CENSURE	REPRIMAND	PROBATION	FINE	OTHER
Montana	MCA 37-8-441	x	x						
Nebraska	RSN 71-1,132.29	x	x						b
Nevada	NRS 632.350	x	x						
New Hampshire	RSA 326-B:12	x	x	x		x			a
New Jersey	NJSA 45:12-22	x	x		x	x		x	f
New Mexico	Rules Art VII	x	x			x	x		
New York	CLNYA 6511	x	x	x	x	x	x	x	a,f
North Carolina	NCGS 90-171.37	x	x	x		x			g
North Dakota	NDCC 43.12.1-14	x	x			x	x		
Ohio	ORCA 4723.28	x	x						
Oklahoma	59 OS 567.8A	x	x						b
Oregon	ORS 678.111&.117	x	x	x	x	x	x	x	
Pennsylvania	49 PS 21.142	x	x						
Rhode Island	GLRI 5-34-24	x	x			x			b
South Carolina	CLSC 40-33-930	x	x	x		x	x		a
South Dakota	SDCL 36-9-49	x	x						
Tennessee	TCA 63-7-115	x	x						
Texas	TCSA 231.81	x	x			x	x		
Utah	UCA 58-31-14	x	x						b
Vermont	VSA 1582	x	x						b
Virginia	CV 54-367.32	x	x		x		x		
Washington	RCW 18.78.135	x	x						
West Virginia	WVC 30-7-11	x	x						b
Wisconsin	WSA 441.07	x	x	x		x			
Wyoming	WS 33-21-145	x	x						b
D.C.	DCCA 2-1702.12	x	x						
Puerto Rico	Act 121 sec 19b	x	x						

Source: HPLIS/CSG; December 31, 1984

KEY:

a May require additional education or training.
b May take other disciplinary measures.
c May order a reasonable physical or mental exam if the license holder's condition is the subject of an investigation.
d May require an examination.
e May require to work under the supervision of another nurse.
f May submit to the care, counseling or treatment of physicians or other professional persons.

TABLE VI-5

LICENSED PRACTICAL NURSE

EXAMINATION OF APPLICANTS

STATE	WRITTEN EXAM USED	ORAL	PRACTICAL	CITATION
Alabama	a			
Alaska	a			12 AAC 44-300
Arizona	a	may	may	ARSA 32-1618
Arkansas	a	may		AS 72-755(b)
California	a	may	may	Chap. 6:5 2870
Colorado	a			CRS 12-38-108.1
Connecticut	a			CGS 20-92
Delaware	a			Art. VI sect. 1.3
Florida	b			Rules 210-8.23
Georgia	a			Rules 400-2-.01
Hawaii	a			Rules 16-89-9
Idaho	a			Rules 03-A-3
Illinois	a			111 IRS 3416
Indiana	a	may	may	IC 25-23-1-13
Iowa	a			Rules 590-3.4(2)
Kansas	a	may	may	KSA 65-1116
Kentucky	b			201 KAR 20:70 sect 3
Louisiana	a	may	may	LRS 37:971
Maine	a	x	x	Rules 2-1(B)
Maryland	a			MCA 7-304
Massachusetts	x	may	may	Chap. 112 sect. 75
Michigan	b			R. 338.1223
Minnesota	a			Rules 6310.5400
Mississippi	b			Rules Chap. 1-1.1
Missouri	b	may	may	VAMS 335.051
Montana	a	x	x	Rules 8.32.402
Nebraska	x			RS 71-1,132.14
Nevada	x			NRS 632.280(1)
New Hampshire	x			RSA 326-B:6
New Jersey	b	x	x	NJAC 13:37-3.3
New Mexico	a			Art. III sect. B
New York	b			Commissioner's Rule 64.2
North Carolina	a			Rules 36 sect. 0211
North Dakota	a			Art. 54-02-01-01
Ohio	a			ORCA 4723-07-01
Oklahoma	b			Art. IV sect 1
Oregon	a			Rules 851-20-163
Pennsylvania	x			49 PS 21.151
Rhode Island	x			Rules 5-34-15
South Carolina	a	x	x	Act 4 Reg 91-15

STATE	WRITTEN EXAM USED	ORAL	PRACTICAL	CITATION
South Dakota	a			Rules 20:48:03:01
Tennessee	b			Rules 1000-2-.01
Texas	b			Standards 235.4
Utah	b			Rules 1984 sect 1(B)
Vermont	b			N 5.01
Virginia	b			Regulation Section V 5.1
Washington	b			WAC 308-117-040
West Virginia	b	may	may	WVC 30-7A-6
Wisconsin	a			N 2.05
Wyoming	a			Rules Chap. II Sect. (2)(a)(ii)
D.C.	x	may	may	Rules 2-1702.8
Puerto Rico	x			Act 121 sect 12

Source: HPLIS/CSG; December 31, 1984

KEY:

x An exam is given but there is no reference to a specific examination.
a National Council of Licensure Examination for Practical Nurses.
b May be prepared by the board or delegated to others.
d The English version of the exam administered by the Canadian Nurses Association Testing Service (CNATS) may be used.

TABLE VI-6

LICENSED PRACTICAL NURSE

INITIAL REQUIREMENTS FOR LICENSE APPLICANTS

STATE	CITATION	ED.	INTERN.[1]	MORALS	AGE	CIT.	RES.
Alabama	CA 34-21-22	x		a			
Alaska	AS 08-68-170	x					
Arizona	ARS 32-1637	x					
Arkansas	AS 72-755	x					
California	Bus. Code 2866	x			17		
Colorado	CRS 12-38-112	x		b			
Connecticut	CGS 20-96	x					
Delaware	DCA 1914	x		c,d,e			
Florida	FS 464.008	x		c,e			
Georgia	OCG 43-26-32	x		a,c	18f		
Hawaii	HRS 457-8	x					
Idaho	IC 54-1408	x		c			
Illinois	111 IRS 3412	x		g	18		
Indiana	IC 25-23-1-12	x		d,h			
Iowa	IC 152.7	x					
Kansas	KSA 65-1116	x					
Kentucky	KRS 314.051	x		c			
Louisiana	LRS 37:970	x		a		yes	
Maine	32 MRSA 2251	x		c			
Maryland	MCA 7-302	x					
Massachusetts	Chap 112-74	x		a			
Michigan	MCLA 368	x		a,e	18		
Minnesota	MS 148.291	x		a,c			
Mississippi	MCA 73-15-21	x		e			
Missouri	VAMS 335.046	x		a,e	18		
Montana	MCA 37-8-415	x					
Nebraska	RS 71-1,132.37	x		a	18		
Nevada	NRS 632.270	x		a	18		
New Hampshire	RSA 326-B:6	x		a,c,d			
New Jersey	NJSA 45:11-27	x		a,b	18		
New Mexico	NMSA 61-3-18	x					
New York	CLNYA 6905	x		a	17		
North Carolina	GSNC 90-171.29	x		c			
North Dakota	NDCC43-12.1-10	x,i					
Ohio	ORCA 4723-7.02	x		a	18		
Oklahoma	OS 567.6	x		a			
Oregon	ORS 678.040	x		c			
Pennsylvania	49 PS 21.151	x		a	18		
Rhode Island	GLR15-34-14	x		a			
South Carolina	CLSC 40-33-730	x		a,c	18		

STATE	CITATION	ED.	INTERN.	MORALS	AGE	CIT.	RES.
South Dakota	SDCL 36-9-37	x					
Tennessee	TCA 63-7-109	x		c			
Texas	TCSA 235.4	x		c			
Utah	UCA 58-31-10	x		a,c			
Vermont	VSA 1576	x					
Virginia	VC 54-367.19	x					
Washington	RCW 18.78.060	x		a,c	18		
West Virginia	WVC 30-7A-3	x		a			
Wisconsin	WS 441.10	x		a,j	18		
Wyoming	WS 33-21-1278	x		d			
D.C.	2-1702.8	x		a,c	18		
Puerto Rico	Act 121 sec 9	x					

Source: HPLIS/CSG; December 31, 1984

KEY:

1	An internship is defined as supervised work experience.
x	Holds a degree from an accredited or approved school of nursing.
a	Good moral character
b	Not a regular user or addicted to any controlled substance for the 12 months prior to application; or, is not habitually intemperate in the use of intoxicating liquor.
c	Is of satisfactory physical and mental health.
d	Has committed no acts which are grounds for disciplinary action as set out in this act.
e	Demonstrates competence in English, as it relates to nursing.
f	Board may allow a 17 year old to take the exam if applicant has completed training required.
g	Has demonstrated integrity and temperate habits during tenure in nursing program. Department may take into consideration any felony conviction, but such shall not be an automatic bar to registration.
h	Has not been convicted of a felony that has direct bearing on ability to practice competently.
i	Recommended by the faculty of the nursing school.
j	No arrest or conviction subject to WS 111.321,.322 and .335.

TABLE VI-7

LICENSED PRACTICAL NURSE

SCHEDULE OF FEES

STATE	APPLICATION	EXAM	RENEWAL	TEMPORARY	DUPLICATE	RECIPROCAL
Alabama	$35		$28/Bi	$10	$10	$50
Alaska	$20	$10	$20/Bi			$10
Arizona	$45		$20/Bi*	$10		$45
Arkansas	$20	$35		$10	$5	$45
California	$50*	$50a*	$50*			
Colorado**		$30	$10/Bi		$30	
Connecticut		$25				
Delaware	$30		$20/Bi			$30
Florida	$40		$22			$20
Georgia	$15	$50	$30/Bi	$15		$50
Hawaii**		$15	$10/Bi			
Idaho	$45		$30/Bi	$10	$5	$60
Illinois	$15	a	$10		$10	
Indiana	$25		$10/Bi		$2	$20
Iowa	$30		$30/Tri		$15	$56
Kansas	$35		$25/Bi			$35
Kentucky	$70		$50/Bi		$10	
Louisiana	$10	$15	$10	$1	$17	
Maine	$30	$18.50	$15			$30
Maryland	$35	$30	$20/Bi	$10	$5	$50
Massachusetts	$30	$6/Bi				$50
Michigan	$45	$10	$10			$25
Minnesota	$35		$16b		$5b	$30
Mississippi	$38.50c	$50	$7		$12	$35
Missouri	$25		$12/Ann		$5	$25
Montana	$35		$10			$42c
Nebraska	$45*		$20*/Bi			$45
Nevada	$45	$30	$50/Bi	$30	$15	
New Hampshire**		$30	$8/Bi	$3		$30
New Jersey	$25		$18/Bi		$10	$20
New Mexico	$45		$30/Bi			$45
New York	$95		$20/Bi	$20		$70
North Carolina	$45*		$25/Bi*			$45*
North Dakota	$40		$30/Ann.			$40
Ohio	$32	$18.50	$10/Bi		$10	$32
Oklahoma	$85*		$40/Bi*			$85*
Oregon	$53		$25/Bi	$8	$19	$33
Pennsylvania	$42.50					
Rhode Island	$50		$30/Bi			
South Carolina	$45		$10/Ann.	$5	$3	$50

STATE	APPLICATION	EXAM	RENEWAL	TEMPORARY	DUPLICATE	RECIPROCAL
South Dakota	$50		$35/Bi	$5	$15	$50
Tennessee	$40		$10/Bi	$5		$40
Texas	$40		$7/Ann.		$5	$40
Utah	$60		$20/Bi	$5		$40
Vermont	$40*		$25/Bi*			
Virginia	$30d		$7/Ann.		$10	
Washington	$35		$10/Ann.		$5	$35
West Virginia	$50		$10/Ann.		$4	$25
Wisconsin**		$20	$25/Bi	$10		$50
Wyoming	$75		$35/Bi	$60		$70
D.C.**	$15	$15	$20/Ann			$25
Puerto Rico	$8		$1/Bi(Revenue Stamps)			$10

Source: HPLIS/CSG; December 31, 1984

KEY:

* Indicates a ceiling imposed by statute.
** Information taken from a December 1982 document and may not be current.
a To cover the cost of the exam.
b A duplicate license is not issued. A replacement license may be issued by notifying the board.
c Includes $7.00 for a temporary permit fee.
d Initial license issue fee is not to exceed $7.00.

TABLE VI-8

LICENSED PRACTICAL NURSE

RECIPROCITY AND ENDORSEMENT

STATE	TYPE	CONDITIONS	CITATION
Alabama	Endorsement	a	CA 34-21-22
Alaska	Endorsement	a or b	AS 08-68-200
Arizona	Endorsement	a	ARS 32-1639
Arkansas	Endorsement	a	AS 72-755(b)2
California	Endorsement	a & c	Chap. 25 2517
Colorado	Endorsement	a,c & d	CRS 12-38-108(2)
Connecticut	Endorsement	a	CGS 20-97
Delaware	Endorsement	a or e	DCA 1916
Florida	Endorsement	a or d	FS 464.009
Georgia	Endorsement	a,d & f	Rules 400-2-06
Hawaii	Endorsement	a	HRS 457.8
Idaho	Endorsement	a+c+d or b	Title 3 Chap.B sec.1
Illinois	Endorsement	a	111 IRS 3428
Indiana	Endorsement	a	IC 25-23-1-13
Iowa	Endorsement	d	IC 152:8
Kansas	Endorsement	a	KSA 65-1116
Kentucky	Endorsement	a,d	201 KAR 20:110
Louisiana	Endorsement	a	RS 37:972
Maine	Endorsement	a	32 MRSA 2254
Maryland	Endorsement	a+d	MCA 7-306
Massachusetts	Endorsement	a	Chap. 112 sec.76
Michigan	Endorsement	a+d	Public Health Code, Act 368
Minnesota	Endorsement	a+c	85 Rules 2659
Mississippi	Endorsement	a+g	MCA 73-15-21(3)
Missouri	Endorsement	a	VAMS 335.051
Montana	Endorsement	a	MCA 37-8-417
Nebraska	Endorsement	a	RS 71-1,132.15
Nevada	Endorsement	a,b,i and j	NRS 632.280
New Hampshire	Endorsement	a,m	RSA 326-B:7
New Jersey	Endorsement	a	NJSA 45:11-27
New Mexico	Endorsement	a,i	NMSA 61-3-19
New York	Endorsement	c,o	Commissioner's Rule 59.6
North Carolina	Endorsement	a,b,k	GSNC 90-171.32
North Dakota	Endorsement	b,i,e	NDCC 43-12.1-12
Ohio	Endorsement	a,i	ORCA 4723.23
Oklahoma	Endorsement	a,b	59 OS 567.6
Oregon	Endorsement	e,h,k	ORS 678.050
Pennsylvania	Endorsement	e,i	49 PS 21.15
Rhode Island	Endorsement	a,b	GLRI 5-34-15
South Carolina	Endorsement	a,b	CLSC 40-33-760

STATE	TYPE	CONDITIONS	CITATION
South Dakota	Endorsement	a,b	SDCL 36-9-39
Tennessee	Endorsement	j	Rules 1000-2.02
Texas	Endorsement	a,b	Sec. 7 of House Bill 47
Utah	Endorsement	b,e	UCA 58-31-10
Vermont	Endorsement	b,i,m	VCA 1576
Virginia	Endorsement	a,b	CV 54-367.20
Washington	Endorsement	b,i,l	RCW 18.78.070
West Virginia	Endorsement	a,b	WVC 30-7A-6
Wisconsin	Endorsement	a,b	Rules N3.03
Wyoming	Endorsement	a,n	WS 33-21-127
D.C.	Endorsement	a	DCCA 2-1702.8
Puerto Rico	Endorsement	a,b	Act 121 sec.12

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Meets all other requirements of this state.
b. Duly licensed under the laws of another state or territory.
c. Has successfully completed the Canadian Nurses' Association Testing Service exam if the board determines it is comparable to the exam administered by this state and has completed a practical nurses education program approved by the board.
d. Took the State Board Testing Pool Exam (SBTPE) for Practical Nurses or the NCLEX for Practical Nurses and passed with a score equal to or above the minimum passing score required by the board, or passed a state constructed exam prior to the advent of SBTPE.
e. Has graduated from an approved program in the U.S. or its territories or from a program in a foreign country, and meets the qualifications for licensees in this state.
f. In the event the applicant has not been actively employed in practical nursing in the past five years, the applicant will be required to give evidence of completion of a practical nursing refresher program within an approved agency within a one year period prior to endorsement. The board may consider alternate methods of evaluating current knowledge.
g. A satisfactory reference from the most recent employer as to the applicant's health and practical nursing competence.
h. Must have passed the licensing exam required by this state at the time of graduation.
i. Has passed an examination in another state if the exam is substantially equivalent to the one in this state.
j. Must speak English.
k. Board may require proof of competence to practice nursing.
l. Those applicants licensed outside the U.S. shall meet all qualifications required by the board and shall pass an exam required by the board.
m. Has practiced nursing within the past five years.
n. If the applicant has not passed an examination acceptable to the board, then he/she must pass an exam or meet other requirements as specified by the board.
o. Must pass the exam acceptable to this state's board on the same date as the test was given in this state. The applicant may still be licensed if the test was given under the same conditions as the exam in this state and the applicant has five out of eight years experience as an LPN immediately preceding the application.

TABLE VI-9

LICENSED PRACTICAL NURSE

CONTINUING EDUCATION REQUIREMENTS

STATE	REQUIRED	CITATION	EXTENT OF EDUCATION
Alabama*	no		
Alaska	yes	AS 08.68.276	Continuing competence required
Arizona*	no		
Arkansas*	no		
California	yes	Bus.& Prof. 2892.5	30 hrs. biennially
Colorado	yes	CRS 12-38-127.5	20 hrs. biennially
Connecticut*	no		
Delaware*	no		
Florida	yes	Rule 210-13-.07	24 hrs. biennially
Georgia*	no		
Hawaii*	no		
Idaho*	no		
Illinois*	no		
Indiana*	no		
Iowa	yes	IC 590-5.3(152)	15 hrs. annually
Kansas	yes	Rules 60-9-102	5-30 hrs. biennially depending upon date license became effective
Kentucky	yes	KRS 314.073	30 hrs. biennially
Louisiana*	no		
Maine*	no		
Maryland*	no		
Massachusetts	may	Chap. 112 sec.74c	
Michigan*	no		
Minnesota	no		
Mississippi	no		
Missouri*	no		
Montana*	no		
Nebraska	yes	Rules Chap.2 sec.1	200 practice hours in last five years + 20 hrs of continuing education or Inservice education
Nevada	yes	NRS 632.343	30 hrs biennially
New Hampshire	yes		20 hrs biennially
New Jersey*	no		
New Mexico	yes	Art. VI sec.B(3)	30 hrs biennially
New York*	no		
North Carolina*	no		
North Dakota*	no		
Ohio*	no		
Oklahoma*	no		
Oregon*	yes		100 hrs biennially
Pennsylvania*	no		
Rhode Island*	no		

STATE	REQUIRED	CITATION	EXTENT OF EDUCATION
South Carolina*	no		
South Dakota*	no		
Tennessee*	no		
Texas*	no		
Utah*	no		
Vermont*	no		
Virginia*	no		
Washington*a	no + a		
West Virginia*	no		
Wisconsin*	no		
Wyoming	yes	Rules Chap.II sec. 12	Evidence of practice of 1600 hrs. in last five years, or 500 hrs. in last two years, or completion of a refresher course accepted by the board; or completion of an orientation program accepted by the board; or completion of a degree program in nursing education accepted by the board; or certification in a specialty area of nursing accepted by the board; or completion of the national nursing licensure examination approved by the board; or completion of 20 hrs. of continuing education in the last two years.
D.C.*	may		
Puerto Rico			

Source: HPLIS/CSG; December 31, 1984

KEY:

* Information taken from a November 1984 document and may not be current.

a. Washington has passed repeal of continuing education which will take effect in 1986

CHAPTER VIII

STATE REGULATION OF REGISTERED NURSES, NURSE PRACTITIONERS, AND NURSE MIDWIVES

REGISTERED NURSE

Type of State Regulation All of the states including Guam, Puerto Rico and the District of Columbia regulate registered nurses through licensure. Although the profession is referred to as "registered nurse", under the definitions of this study, the profession is licensed by states. (See Table VII-1).

Scope of Practice Each state identifies a scope of practice to define the areas in which a registered nurse can practice, and the scope of practice is very similar across the states. Alabama's scope of practice offers a representative view:

> PRACTICE OF PROFESSIONAL NURSING. The performance, for compensation, of any act in the care and counseling of persons or in the promotion and maintenance of health and prevention of illness and injury based upon the nursing process which includes systematic data gathering, assessment, appropriate nursing judgment and evaluation of human responses to actual or potential health problems through such services as case finding, health teaching, health counseling; and provision of care supportive to or restorative of life and well being; and executing medical regimens including administering medications and treatments prescribed by a licensed or otherwise legally authorized physician or dentist. A nursing regimen shall be consistent with and shall not vary any existing medical regime. Additional acts requiring appropriate education and training designed to maintain access to a level of health care for the consumer may be performed under emergency or other conditions

> which are recognized by the nursing and medical professions as proper to be performed by a registered nurse.

This definition is so prevalent that the distinctions from state to state are between the various levels of nursing (i.e. RN's, Nurse Practitioners or LPN's) rather than within the same level. The major differences between Registered Nurses and Licensed Practical Nurses are the educational preparation and the scope of practice. Licensed Practical Nurses must practice under the supervision of Registered Nurses or licensed physicians.

The American Nurses' Association's Model Practice Act is similar to Alabama's, but the Model Act stresses the educational preparation of the registered nurse:

> The practice of nursing means the performance for compensation of professional services requiring substantial specialized knowledge of the biological, behavioral, psychological, and sociological sciences and of nursing theory as the basis for assessment, diagnosis, planning, intervention, and evaluation in the promotion and maintenance of health; the casefinding and management of illness, injury or infirmity; the restoration of optimum function; or the achievement of a dignified death. Nursing practice includes but is not limited to administration, teaching, counseling, supervision, delegation, and evaluation of practice and execution of the medical regimen, including the administration of medications and treatments prescribed by any person authorized by state law to prescribe. Each registered nurse is directly accountable and responsible to the consumer for the quality of nursing care rendered.

This model permits flexibility within the profession by maintaining a broad definition of nursing.

Organization of State Regulatory Bodies and Functions All states regulate registered nurses through a board of nursing. In forty-four of the states the registered nurse members of the board comprise a majority while in five states, the boards are exclusively composed of registered nurses. All but ten states have consumer members sitting on the board. Twenty-five of the boards have registered nurse members who are also educators. See Table VII-2 for full details.

Almost all of the states utilize the board of nursing to approve or accredit nursing education programs, issue the licenses and promulgate the rules and regulations of the board. (See Table VII-3).

All of the boards but one can suspend and/or revoke a nurse's license. Many of the boards also have the power to restrict a license, and to reprimand or probate the nurse. (See Table VII-4).

All of the states require the applicant to pass a written exam. A few of the states permit an oral or practical examination, but none use them. According to the National Council of State Boards of nursing, all states now use the National Council Licensure Examination for Registered Nurses. (See Table VII-5).

Requirements for Licensure All states require that the nurse have a degree or a diploma from an accredited school of nursing. Most states require that the applicant be of good moral character. No states have citizenship or residency requirements. Table VII-6 contains additional information regarding requirements for licensure.

Interstate Recognition of Credentials All states allow for endorsement of licenses of nurses from other states provided certain conditions are met. These conditions are set out in Table VII-8.

Continuing Education Only fifteen states require that the registered nurse satisfy continuing education requirements before the license can be renewed. (See Table VII-9).

Fee Schedule Fee levels for six types of fees are given in Table VII-7.

TABLE VII-1

RESIGTERED NURSE

TYPE OF STATE REGULATION

STATE	TYPE	CITATION
Alabama	Licensure	CA 34-21-200
Alaska	Licensure	AS 08.68.160
Arizona	Licensure	ARS 32-1601.1
Arkansas	Licensure	AS 72-745
California	Licensure	Bus. & Prof. Code 6.2732
Colorado	Licensure	CRS 12-38-103(11)
Connecticut	Licensure	CGS 20-92
Delaware	Licensure	DCA 24-1902.(B)
Florida	Licensure	FS 464.003(4)
Georgia	Licensure	OCG 43-26-6(2)
Hawaii	Licensure	HRS 457-1
Idaho	Licensure	IC 54-1401
Illinois	Licensure	111 IRS 3405(2)
Indiana	Licensure	IC 25-29-1-1
Iowa	Licensure	IC 152.1(2)
Kansas	Licensure	KSA 65-1113
Kentucky	Licensure	KRS 314.011(2)
Louisiana	Licensure	RS 37:911
Maine	Licensure	32 MRSA 2101
Maryland	Licensure	ACM 7-101(c)
Massachusetts	Registration*	ALM 112.74
Michigan	Licensure	R 338.1222(1)
Minnesota	Licensure	MS 148.171(2)
Mississippi	Licensure	MCA 73-15-3
Missouri	Licensure	RSMo 335.016(a)
Montana	Licensure	MCA 37-8-101(1)
Nebraska	Licensure	RS 71-1,132.04
Nevada	Licensure	NRS 632.130
New Hampshire	Licensure	RSA 326-B:15(II)
New Jersey	Licensure	NJSA 45:11-37
New Mexico	Licensure	NMSA 61-3-5
New York	Licensure	CLNYA 6903
North Carolina	Licensure	GSNC 90-171.43
North Dakota	Licensure	NDCC 43-12.1-03
Ohio	Licensure	ORCA 4723.36
Oklahoma	Licensure	59 OS 567.14
Oregon	Licensure	ORS 678.021
Pennsylvania	Licensure	49 PS 21.1
Rhode Island	Licensure	GLRI 5-34-2
South Carolina	Licensure	CLSC 40-33-510

STATE	TYPE	CITATION
South Dakota	Licensure	SDCL 36-9-68
Tennessee	Licensure	TCA 63-7-120
Texas	Licensure	NURSING ACT 4518
Utah	Licensure	UCA 58-31-2
Vermont	Licensure	VSA 1584
Virginia	Licensure	VC 54-367.35
Washington	Licensure	RCW 18.88.020
West Virginia	Licensure	WVC 30-7-2
Wisconsin	Licensure	WSA 441.06
Wyoming	Licensure	WS 33-21-145
D.C.	Registration*	DCCA 2-1701.1
Guam	Licensure	16PL 12327
Puerto Rico	Licensure	ACT 121 s20

Source: HPLIS/CSG; December 31, 1984

* Although this is designated in the state law as registration, according to this study's definition of licensure, certification and registration, it is in effect licensure.

TABLE VII-2

REGISTERED NURSE

ORGANIZATIONAL PATTERN OF STATE REGULATORY BOARDS

STATE	NAME OF BOARD & DEPARTMENT	NO. OF BOARD MEMBERS				CITATION
		PROF.	PUB.	OTH.	TOTAL	
Alabama	Bd. of Nursing	6*	0	4a	10	AC 34-21-2
Alaska	Bd. of Nursing Dept. of Commerce & Econ. Dev.	4*	2	1a	7	AS 08.68.010
Arizona	Bd. of Nursing	5	2	2a	9	ARSA 32-1602(A)
Arkansas	Bd. of Nursing	6	1	6b	13	AS 72-747
California	Bd. of Registered Nursing Dept. of Consumer Affairs	5*	3	1c	9	CBPC 6.2702
Colorado	Bd. of Nursing Dept. of Regulatory Agencies	6***	2	3a	11	CRS 12-38-104
Connecticut	Bd. of Examiners for Nursing Dept. of Health Services	5***	4	2a	11	CGS 20-88
Delaware	Bd. of Nursing	5	2	4	11	DCA 24-1903(A)
Florida	Bd. of Nursing Dept. of Prof. Regulation	5	2	2a	9	FS 464.004
Georgia	Bd. of Nursing	7	1	0	8	OCG 43-26-2
Hawaii	Bd. of Nursing Dept. of Commerce & Consumer Affairs	5	2	2a	9	HRS 457-3
Idaho	Bd. of Nursing Dept. of Self Governing Agencies	4	1	2a	7	IC 54-1403
Illinois	Bd. for Opinions of Prof. Nursing Dept. of Registration & Education	4d	0	4e	8	111 IRS 3406
Indiana	Bd. of Nurses' Registration & Education	5*	1	2a	8	IC 25-32-1-2
Iowa	Bd. of Nursing Department of Health	4***	2	1a	7	IC 147.14
Kansas	Bd. of Nursing	5	2	4i	11	KSA 74-1106
Kentucky	Bd. of Nursing	7	1	3a	11	KRS 314.121
Louisiana	Bd. of Nursing Dept. of Health & Human Resources	7	0	0	7	RS 37:914

STATE	NAME OF BOARD & DEPARTMENT	NO. OF BOARD MEMBERS				CITATION
		PROF.	PUB.	OTH.	TOTAL	
Maine	Bd. of Nursing	5*	1	1a	7	32 MRSA 2151
Maryland	Bd. of Examiners of Nurses	6***	2	3a	11	MCA 7-202
Massachusetts	Bd. of Registration in Nursing	5***	1	2a	8	ALM 112-3
Michigan	Bd. of Nursing Dept. of Licensing & Regulation	9***	2	3a	14	Pub. Health Cod 17221
Minnesota	Bd. of Nursing	5**	3	3a	11	MS 148.181
Mississippi	Bd. of Nursing	6**	1	5f	12	MCA 73-15-9
Missouri	Bd. of Nursing	5	1	2a	8	RSMo 335.021
Montana	Bd. of Nursing Dept. of Commerce	4*	2	3a	9	MCA 2-15-1844
Nebraska	Bd. of Nursing Dept. of Health	7****	1	2a	10	RS 71-1,132.07
Nevada	State Bd. of Nursing	4	1	2a	7	NRS 632.030
New Hampshire	Bd. of Nursing Ed. & Nursing Reg.	5***	1	1a	7	RSA 326B-3
New Jersey	Bd. of Nursing Dept. of Law and Public Safety	7	1	2a	10	NJSA 45:11-24
New Mexico	State Bd. of Nursing	4	1	2a	7	NMSA 61-3-8
New York	State Bd. of Nursing Dept. of Education	11	2	4a	17	CLNYA 6904/6508
North Carolina	N.C. Bd. of Nursing	9***	2	4a	15	GSNC 90.171.21
North Dakota	N.D. Bd. of Nursing	5	1	3a	9	NDCC 54-01-01-01
Ohio	Bd. of Nursing Ed. and Nurse Regist.	5*	0	3a	8	ORCA 4723.01
Oklahoma	Bd. of Nurse Regist. and Nursing Ed.	5	0	0	5	59 OS 567.4
Oregon	State Bd. of Nursing	6*	1	2a	9	ORS 678.140
Pennsylvania	St. Bd. of Nurse Examiners of the Commonwealth/ Dept. of State	5	2	3g	10	71 PS 128
Rhode Island	Bd. of Nurse Reg. & Nursing Ed.	7****	0	2a	9	GLRI 5-34-4
South Carolina	State Bd. of Nursing	4	1	2a	7	CLSC 40-33-210

		NO. OF BOARD MEMBERS				
STATE	NAME OF BOARD & DEPARTMENT	PROF.	PUB.	OTH.	TOTAL	CITATION
South Dakota	S.D. Bd. of Nursing	6**	2	3a	11	SDCL 36-9-5
Tennessee	TN Bd. of Nursing	5	1	3a	9	TCA 63-7-202
Texas	Bd. of Nurse Examiners	6***	3	0	9	Nurse Act 4513
Utah	Bd. of Nursing Dept. of Business Regulation	9****	1h	3a	13	UCA 58-31-5
Vermont	Bd. of Nursing	4	2	2a	8	VSA 1573
Virginia	VA State Bd. of Nursing	5	0	2a	7	CV54-367-3
Washington	Washington State Bd. of Nursing Dept. of Licensing	6	1	0	7	RCW 18.88.060
West Virginia	Bd. of Examiners for Registered Nurses	5	0	0	5	WVC 30-7-3
Wisconsin	Wisconsin St. Bd. of Nursing Dept. of Regulation & Licensing	5	2	2a	9	WSA 15.403
Wyoming	Bd. of Nursing	4*	1	2a	7	WS 33-21-121
D.C.	Nurses Examining Bd. Dept. of Commerce & Reg. Affairs	5	0	0	5	DCCA 2-1701.2
Guam	Bd. of Nurse Examiners	5*	1	1a	7	16 PL 12303
Puerto Rico	Bd. of Nurse Examiners	5	0	0	5	Act 121 sec.2

Source: HPLIS/CSG; December 31, 1984

KEY:

* One member engaged in education
** Two members engaged in education
*** Three members engaged in education
a. Others are LPN's
b. Three LPN's and three licensed psychiatric technician nurses
c. Licensed physician
d. One who is a chief executive of a hospital
e. Four physicians, one of whom is chief executive officer of a hospital
f. Four LPN's and one physician
g. Two LPN's and one who is the Commissioner of Professional and Occupational Affairs
h. The public member is a vocational educator.
i. Two LPN's and two licensed mental health technicians

TABLE VII-3

REGISTERED NURSE

FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	ISSUE LICENSE	APPROVE/ACCREDIT EDUCATION	PROMULGATE REGULATIONS
Alabama	Board	Board	Board
Alaska	Board	Board	Board
Arizona	Board	Board	Board
Arkansas	Board	Board	Board
California	Board	Board	Board
Colorado	Board	Board	Board
Connecticut	Board	Board	Department[b]
Delaware	Board	Board	Board
Florida	Department	Board	Board
Georgia	Board	Board	Board
Hawaii	Board	Board	Board
Idaho	Board	Board	Board
Illinois	Department	Department	Department
Indiana	Board	Board	Board
Iowa	Board	Board	Board
Kansas	Board	Board	Board
Kentucky	Board	Board	Board
Louisiana	Board	Board	Board
Maine	Board	Board	Board
Maryland	Board	Board	Board
Massachusetts	Board	Board	Board
Michigan	Board	Board	Board
Minnesota	Board	Board	Board
Mississippi	Board	a	Board
Missouri	Board	Board	Board
Montana	Board	Board	Board
Nebraska	Board	Board	Board
Nevada	Board	Board	Board
New Hampshire	Board	Board	Board
New Jersey	Board	Board	Board
New Mexico	Board	Board	Board
New York	Department	Department	Department
North Carolina	Board	Board	Board
North Dakota	Board	Board	Board
Ohio	Board	Board	Board
Oklahoma	Board	Board	Board
Oregon	Board	Board	Board
Pennsylvania	Board	Board	Board
Rhode Island	b+c	Board	Board
South Carolina	Board	Board	Board

STATE	ISSUE LICENSE	APPROVE/ACCREDIT EDUCATION	PROMULGATE REGULATIONS
South Dakota	Board	Board	Board
Tennessee	Board	Board	Board
Texas	Board	Board	Board
Utah	b+d	Divisionb	Board
Vermont	Board	Board	Board
Virginia	Board	Board	Board
Washington	b+e	Board	Board
West Virginia	Board	Board	Board
Wisconsin	Board	Board	Board
Wyoming	Board	Board	Board
D.C.	Department	Department	Department
Guam	Board	Board	Board
Puerto Rico	Board	f	Board

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Program approved by the Bd. of Trustees of State Institutions of Higher Learning, or one approved by a legal accrediting agency of another state or country which is satisfactory to the Mississippi Board of Nursing.
b. Recommendation of the Board required
c. Administrator of Professional Reg.
d. Division of Registration
e. Department of Licensing
f. Superior Education Council

TABLE VII-4

REGISTERED NURSE

ENFORCEMENT FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	CITATION	SUSP.	REVOKE	RESTR. LIC.	CENSURE	REPRI.	PROB.	FINE	OTHER
Alabama	CA 34-21-25	x	x						b
Alaska	AS 08.68.275	x	x	x	x	x	x	x	a
Arizona	ARS 32-1663	x	x						b
Arkansas	AS 72-760	x			x		x		b
California	CBPC 2759	x	x				x		b
Colorado	CRS 12-38-117	x	x	x	x				a
Connecticut	CGS 20-99	x	x						c
Delaware	DCA 24-1922B	x	x	x	x		x		a,b
Florida	FS 464.018(2)	x	x			x	x	x	a,c,d,e
Georgia	OCG 43-26-4(6)	x	x	x		x	x		f
Hawaii	HRS 457-12	x	x						b
Idaho	IC 54-1412	x	x	x					
Illinois	111 IRS 3420	x	x						
Indiana	IC 25-23-1-25.1e	x	x	x	x	x			
Iowa	IC 152.10	x	x	x			x		c
Kansas	KSA 65-1120	x	x	x					
Kentucky	KRS 314.091	x	x	x			x		c
Louisiana	RS 37:921	x	x						b
Maine	32 MRSA 2105.2	x	x						
Maryland	ACM 7-313	x	x			x	x		
Massachusetts	ALM 112-61	x	x						
Michigan	Pub.H.Code 16226	x	x	x		x	x	x	
Minnesota	MS 148.261	x	x	x					
Mississippi	MCA 73-15-29	x	x	x		x	x	x	a,b,e,f
Missouri	RSMo 335.066	x	x		x		x		
Montana	MCA 37-8-441	x	x						
Nebraska	RS 71-1,132.29	x	x						b
Nevada	NRS 632.350	x	x						
New Hampshire	RSA 326-B:12	x	x	x		x			a
New Jersey	NJSA 45:1-22	x	x		x	x		x	f
New Mexico	RULES ART VII	x	x			x	x		
New York	CLNYA 6511	x	x	x	x	x	x	x	a,f
North Carolina	GSNC 90.171.37	x	x	x		x			g
North Dakota	NDCC 43-12.1-14	x	x			x	x		
Ohio	ORCA 4723.28	x	x						
Oklahoma	59 OS 567.8a	x	x						b
Oregon	ORS 678.111,117	x	x	x	x	x	x	x	
Pennsylvania	49 PS 21.2d	x	x						
Rhode Island	GLRI 5-34-24	x	x			x			b
South Carolina	CLSC 40-33-930	x	x	x		x	x		a

STATE	CITATION	SUSP.	REVOKE	RESTR. LIC.	CENSURE	REPRI.	PROB.	FINE	OTHER
South Dakota	SDCL 36-9-49	x	x						
Tennessee	TCA 63-7-115	x	x						
Texas	Nursing Act 4525	x	x				x		
Utah	UCA 58-31-14	x	x						b
Vermont	VSA 1582	x	x						b
Virginia	VC 54-367.32	x	x		x		x		
Washington	RCW 18.78.135	x	x						
West Virginia	WVC 30-7-11	x	x						b
Wisconsin	WSA 441.07	x	x	x		x			
Wyoming	WS 33-21-145	x	x						b
D.C.	DCCA 2-1701.7	x	x						
Guam	16 PL 12324	x	x	x					a,f,e
Puerto Rico	ACT 121s19(b)								

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Requires additional education or training.
b. Other disciplinary action may be taken.
c. A reasonable physical or mental examination may be ordered if the license holder's condition is the subject of an investigation.
d. May require an examination.
e. May require to work under the supervision of another nurse.
f. Submit to the care, counseling or treatment of a physician or other professionals.
g. May require remedial education.

TABLE VII-5

REGISTERED NURSE

EXAMINATION OF APPLICANTS

STATE	WRITTEN EXAM USED	ORAL	PRACTICAL	CITATION
Alabama	a or e			CA 34-21-21
Alaska	a			12 AAC 44300
Arizona	a	may	may	R4-19-25
Arkansas	c	may		AS 72-754(b)
California	b			16 CAC 1411.5
Colorado	a			CRS 12-38-108(1)
Connecticut	d			CGS 20-92
Delaware	a			Art. VI 1.3
Florida	b			Rules 210-8.23(1)
Georgia	b			Rules 410-6-01(2)
Hawaii	a			Rules 16-89-9
Idaho	a			IC 03-A-3
Illinois	d			111 IRS 3416
Indiana	d	may	may	IC 25-23-1-11
Iowa	a			IC 590-3.4(2)
Kansas	x	may	may	KSA 65-1115
Kentucky	b			201 KAR 20:70 sec3
Louisiana	b			RS 1.071
Maine	a			Rules Chap 1.1(b)
Maryland	d			MCA 7-304
Massachusetts	x	may	may	ALM 112-75
Michigan	b			R. 338.1223
Minnesota	a			Rules 6310.0500
Mississippi	b			Rules Chap 1-1.1
Missouri	b	may	may	RSMo 335.046
Montana	a			MCA 8.32.402
Nebraska	x			RS 71-1,132.14
Nevada	x	may	may	NRS 632.150(1)
New Hampshire	x			RSA 326-B:6
New Jersey	a			NJSA 13:37-2.2
New Mexico	a			Rules Art.III sB
New York	b			Comm. Rule 64.2
North Carolina	a			36 Bd.Rules 0211
North Dakota	a			Rules 54-02-01-01
Ohio	a			Rules 4723-7-01
Oklahoma	b			Rules Art. V sec.1
Oregon	a			Rules 851-20-163
Pennsylvania	x			49 PS 21.23
Rhode Island	x			GLRI 5-34-11
South Carolina	a			Rules Art 3 91-13

STATE	WRITTEN EXAM USED	ORAL	PRACTICAL	CITATION
South Dakota	a			Rules20:48:03:01
Tennessee	b			Rules 1000-1:01
Texas	b			Nursing Act 4518
Utah	b			Rules(1984) s1(B)
Vermont	b			N 5.01
Virginia	b			Rules sec. V 5.1
Washington	b	may	may	
West Virginia	b		may	WVC 30-7-6
Wisconsin	a			N 2.05
Wyoming	a			R II-2(a)(i)
D.C.	x			DCCA 2-1701.4
Guam	x			16 PL 12311(a)
Puerto Rico	x			Act 121 Sect 9

Source: HPLIS/CSG; December 31, 1984

KEY:

x. An exam is given but there is no reference to a specific examination.
a. National Council Licensure Examination for Registered Nurses
b. May be prepared by the Board or delegated to others
c. Approved by Division of Nurse Registration
d. Approved by Board or Department
e. The English version of the exam administered by the Canadian Nurses Association Testing Service (CNATS).

Although not reflected in state statutes and regulations, the National Council of State Boards of Nursing reports that all states now use the National Council Licensure Examination for Registered Nurses.

TABLE VII-6

REGISTERED NURSE

INITIAL REQUIREMENTS FOR LICENSE APPLICANTS

STATE	CITATION	EDUCATION	INTERN.[1]	MORALS	AGE	CIT.	RES.
Alabama	CA 34-21-21	x		a			
Alaska	AS 08.68.170	x					
Arizona	ARS32-1632	x					
Arkansas	AS 72-754	x		a			
California	Bus. & Prof. Code 2763	x					
Colorado	CRS 1238-111	x		b			
Connecticut	CGS 20-93	x					
Delaware	DCA 1910	x		c,d,e			
Florida	FS 464.008	x		c,e			
Georgia	OCG 43-26-7	x					
Hawaii	HRS 457.7	x					
Idaho	IC 54-1407	x		c			
Illinois	111 IRS 3411	x		f	18		
Indiana	IC 25-23-1-11	x		d,g			
Iowa	IC 152.7	x					
Kansas	KSA 65-1115	x					
Kentucky	KRS 314.041	x		c			
Louisiana	RS 37:920	x					
Maine	32 MRSA 2201	x					
Maryland	ACM 7-302	x					
Massachusetts	ALM 112-74	x		a			
Michigan	MCLA 368	x		a,e	18		
Minnesota	MS 148-211	x		a,c			
Mississippi	MCA 73-15-19	x		e			
Missouri	RSMo 335.046	x		a	19		
Montana	MCA 37-8-405	x					
Nebraska	RS 71-1,132.13	x		a			
Nevada	NRS 632.140	x		a,c			
New Hampshire	RSA 326-B:6	x		c,d			
New Jersey	NJSA 45:11-26	x		a,b	18		
New Mexico	NMSA 61-3-13	x					
New York	CLNYA 6905	x		a	18		
North Carolina	GSNC 90-171.29	x		c			
North Dakota	NDCC 43-12.110	x		h			
Ohio	Rules 4723-7-02	x		a			
Oklahoma	OS 567.5	x		a			
Oregon	ORS 678.040	x		c			
Pennsylvania	63 PS 216	x		a			
Rhode Island	GLRI 5-34-10	x		a			
South Carolina	CLSC 40-33-530	x		a,c	18		

STATE	CITATION	EDUCATION	INTERN.	MORALS	AGE	CIT.	RES.
South Dakota	SDCL 36-9-30	x					
Tennessee	TCA 63-7-104	x		c			
Texas	Nurse Act 4518	x					
Utah	UCA 58-31-9	x		a			
Vermont	VSA 1576	x					
Virginia	CV 54-367.13	x					
Washington	RCW 18-88-130	x					
West Virginia	WVC 30-7-6	x		a			
Wisconsin	WSA 441.04	x		a,i			
Wyoming	WS 33-21-127	x		d			
D.C.	DCCA 2-1701.4	x		a	18		
Guam	16 PL 12310	x					
Puerto Rico	ACT 121 s12	x					

Source: HPLIS/CSG; December 31, 1984

KEY:

-- Means not required
1 An internship is defined as supervised work experience.
x Holds a degree from an accredited or approved school of nursing.
a Be of good moral character
b Is not a regular user, or be addicted to any controlled substance for 12 months prior to application; or is not habitually intemperate in the use of intoxicating alcohol
c Is of satisfactory physical and mental health
d Has committed no acts which are grounds for disciplinary action as set out in the act.
e Demonstrates competence in English as it relates to nursing
f Has demonstrated integrity and temperate habits during tenure in the nursing program.
g Applicant has not committed a felon which has a direct bearing on the applicant's ability to practice competently.
h Recommendation by the faculty
i No arrest or conviction subject to ss 111.321,322,335

TABLE VII-7

REGISTERED NURSE

SCHEDULE OF FEES

STATE	CITATION	APP.	EXAM	RENEWAL	TEMP.	DUP.	RECIPROCAL
Alabama		$45		$28/Bi	$10	$10	$50
Alaska	AS 08.68.220	$30	$20	$20/Bi			$20
Arizona	R 4-19-02	$45		$20/Bi*	$10	$5	$45
Arkansas	Act 824	$25	$60	$25	$10		$50
California	CAC 1417	$25	$35	$25	$12	$10	$20
Colorado							
Connecticut	CGS 20-93		$30				
Delaware	R Sec. 5	$30		$20/Bi			$30
Florida	R 210-15-01	$50		$22			$30
Georgia	R 410-7.01	$15	$25	$30/Bi	$15		$60
Hawaii**			$30	$10/Bi			
Idaho	Title 07.A	$60		$30/Bi	$10	$5	$60
Illinois	111 IRS 3429	$25	cost	$10/Bi		$10	$10
Indiana	848 IAC 1-1-7	$40		$10/Bi		$2	$25
Iowa	IAC 590-3.1(6)	$40		$36/3 Yrs		$15	$56
Kansas	R 60-4-101	$60		$25/Bi			$60
Kentucky	201 KAR 20:240	$70		$50/Bi		$10	
Louisiana							
Maine	R Chap. 1	$40	$18.50	$15		$40	
Maryland		$35	$18.50	$20/Bi	$10	$5	$50
Massachusetts	Chap. 112-74	$30		$6/Bi			$50
Michigan	PHC Act 368	$45		$10			$25
Minnesota	R 6310.0500	$50		$16		$5a	$40
Mississippi		$58.50b		$55/Bi	$7	$12	$50
Missouri		$40		$12/An		$5	$40
Montana	R 8-32.402	$35		$10			$35
Nebraska	RS 71-1,132	$60		$20/Bi			
Nevada	R 632.190	$65	$50	$50/Bi	$40	$15	
New Hampshire**			$40	$10/Bi	$3		$40
New Jersey	NJAC 13:37-12	$35		$18/Bi		$10	$30
New Mexico	61-3-16 NMSA	$75*		$30*/Bi			$75*
New York	CLNYA 6905	$95		$20/Bi	$20		$70
North Carolina	GSNC 90-171.27	$45*		$25*/Bi			$45*
North Dakota	R 54-02-01-06	$65		$40/An			$65
Ohio	R 4723-7	$32	$18.50	$10/Bi		$10	$32
Oklahoma	OS 567.7	$125*		$40*/Bi			$125*
Oregon	R 851-20-295	$53		$25/Bi	$8	$19	$33
Pennsylvania	R 21.126	$42.50					
Rhode Island	GLRI 5-34-12	$75		$30/Bi			
South Carolina	Act 7-91-30	$65		$10/An	$5	$3	$50

STATE	CITATION	APP.	EXAM	RENEWAL	TEMP.	DUP.	RECIPROCAL
South Dakota	R 20:48:06:01	$75		$35/Bi	$5	$15	$75
Tennessee	R 1000-1-.12	$60		$10/Bi	$5		$60
Texas	TCS 4527	$75*	+ $10*c	$25/Bi			$75*
Utah	R 1984-1(A)	$60		$20/Bi	$5		$40
Vermont	1577	$40*		$25*/Bi			$40*
Virginia	R Sec.VI(6)	$40	+ $7c	$7/An		$10	
Washington	WAC 308-120-275	$35		$15/An		$5	$35
West Virginia	WVC 30-7-6	$100*		$10*/An	$70*		$100*
Wisconsin**	See 440.05(6)		$30	$25/Bi			$50
Wyoming	R Chap. V-3	$75		$40/Bi	$60		$80
D.C.**		$25	$25	$24/An			$40
Puerto Rico**			$5	$2			$10

Source: HPLIS/CSG; December 31, 1984

KEY:

* Not to exceed
** Information taken from a December 1982 document and may not be current.
a A replacement license is issued when original license is lost, stolen or destroyed.
b Includes $7 temporary permit fee.
c Initial license fee

TABLE VII-8

REGISTERED NURSE

RECIPROCITY AND ENDORSEMENT

STATE	TYPE	CONDITIONS	CITATION
Alabama	Endorsement	a	CA 34-21-21
Alaska	Endorsement	a,b or c	AS 08.68.200
Arizona	Endorsement	a,b	ARS 32-1634
Arkansas	Endorsement	a,b	AS 72-754(b)2
California	Endorsement	a,b	Bus. and Prof. Code 2732.1(b)
Colorado	Endorsement	a,b,c,d	CRS 12-38-108(2)
Connecticut	Endorsement	a,b	CGS 20-94
Delaware	Endorsement	a,b or f	DCA 1912
Florida	Endorsement	a,b or a,e	FS 464.009
Georgia	Endorsement	a,b,g	OCG 43-26-7.b
Hawaii	Endorsement	a,b	HRS 457-7
Idaho	Endorsement	a,b,d or c	Title 3 Chap.B-1
Illinois	Endorsement	a,b	111 IRS 3428
Indiana	Endorsement	a,b	IC 25-23-1-11
Iowa	Endorsement	a,e	IC 152.8
Kansas	Endorsement	a	KSA 65-1115
Kentucky	Endorsement	a,b,e	201 KAR 20:110
Louisiana	Endorsement	a,b	LRS 37:920
Maine	Endorsement	a,b	32 MRSA 2205
Maryland	Endorsement	a,b,e	MCA 7-306
Massachusetts	Endorsement	a	ALM 112-76
Michigan	Endorsement	a,b,e	Public Health Code 368
Minnesota	Endorsement	a,b,d	8 SR 2659
Mississippi	Endorsement	a,b,h	MCA 73-15-19(3)
Missouri	Endorsement	a	RSMo 335.051
Montana	Endorsement	a,b	MCA 37-8-407
Nebraska	Endorsement	a,b	RS 71-1,132.15
Nevada	Endorsement	a,b,i,j	NRS 632.160
New Hampshire	Endorsement	a,b,m	RSA 326-B-7
New Jersey	Endorsement	a,b	NJSA 45:11-26
New Mexico	Endorsement	a,i	NMSA 61-3-14
New York	Endorsement	n	Comm. Rule 59.6
North Carolina	Endorsement	a,b,k	GSNC 90-171.32
North Dakota	Endorsement	b,e,i	NDCC 43-12.1-12
Ohio	Endorsement	a,i	ORCA 4723.14
Oklahoma	Endorsement	a,b	59 OS 567.5
Oregon	Endorsement	e,k,i	ORS 678.050
Pennsylvania	Endorsement	a,h	49 PS 21-28
Rhode Island	Endorsement	a,b	GLRI 5-34-11
South Carolina	Endorsement	a,b	CLSC 40-33-560

STATE	TYPE	CONDITIONS	CITATION
South Dakota	Endorsement	a,b	SDCL 36-9-32
Tennessee	Endorsement	a,b,d,i	Rules 1000-1.02
Texas	Endorsement	a,b	Act 4522
Utah	Endorsement	a,b	UCA 58-31-9
Vermont	Endorsement	b,i,m	VCA 1576
Virginia	Endorsement	a,b	CV 54-367.14
Washington	Endorsement	b,i,l	RCW 18.88.150
West Virginia	Endorsement	a,b,k	WVC 30-7-6 & 30-7-7
Wisconsin	Endorsement	a,i	Rule N. 3.03
Wyoming	Endorsement	a,b	
D.C.	Endorsement	o	DCCA 2-1701.5
Guam	Endorsement	a,b	16 Public Act 12311
Puerto Rico	Endorsement	a,b	Act 121 sec.11

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Applicant meets all other requirements of this state.
b. Applicant is duly licensed under the laws of another state or territory.
c. Applicant has successfully completed the Canadian Nurses' Assoc. Testing Service examination, if the Bd. determines it is comparable to the exam administered by this state; and has completed a registered nursing education program approved by the Board.
d. Applicant nas passed the SBTPE or the NCLEX, or a state constructed exam for those licensed prior to the advent of SBTPE.
e. Applicant has graduated from an approved program in the U.S. or its territories or from a program in a foreign country; and is duly licensed.
f. If the applicant has not been actively employed in professional nursing in the past five years, the applicant will be required to give evidence of completion of a professional nursing refresher program with an approved agency within a one-year period prior to endorsement. The Bd. may consider alternate methods of evaluating current knowledge.
g. Applicants who have not been employed in the profession at any time during the five years immediately prior to application, shall complete instruction approved by the Bd. not more than 6 months prior to reinstatement. A temporary permit may be issued during the 6 month period. Other criteria may be established by the Bd.
h. Applicant must have passed the licensing exam required by this state at the time of graduation.
i. Applicant has passed an examination which is substantially equivalent to the one given in this state.
j. Applicant must speak English.
k. Board may require proof of competence to practice nursing.
l. Those applicants licensed outside the U.S. shall meet all qualifications required by the Bd. and shall pass an exam required by the Bd.
m. Applicant has practiced nursing within the last five years.
n. The applicant must pass the exam acceptable to this state's board on the same date as the test was given in this state. The applicant may still be licensed if the test was on a different date, if the test was given under the same conditions as the exam in this state and the applicant has five out of eight years experience as

an RN immediately preceding the application.

o. The Bd. of Nursing shall register any nurse who is registered in another by examination and holds a diploma from a training school with substantially equivalent standards.

TABLE VII-9

REGISTERED NURSE

CONTINUING EDUCATION REQUIREMENTS

STATE	REQUIRED	CITATION	EXTENT OF EDUCATION
Alabama*	No		
Alaska	Yes	AS 08.68.276	
Arizona*	No		
Arkansas*	No		
California	Yes	Rules 1451	30 hrs/Biennially
Colorado	Yes	CRS 12-38-127.5	20 hrs/Biennially
Connecticut*	No		
Delaware*	No		
Florida	Yes	R 210-13.07	24 hrs/Biennially
Georgia*	No		
Hawaii*	No		
Idaho*	No		
Illinois	No		
Indiana*	No		
Iowa	Yes	IC 590-5.3(152)	15 hrs/Annually
Kansas	Yes	R 60-9-102	5 to 30 hrs (a)
Kentucky	Yes	KRS 314.073	30 hrs/Biennially
Louisiana*	No		
Maine*	No		
Maryland*	No		
Massachusetts	May	Chap 112-74c	
Michigan*	No		
Minnesota	Yes	Rules 6310.2800	30 hrs/Biennially
Mississippi*	Yes		40 hrs/Biennially
Missouri*	No		
Montana*	No		
Nebraska	Yes	R Chap 2-1	20 hrs/Past 5 years (b)
Nevada	Yes	NRS 632.343	30 hrs/Biennially
New Hampshire	No		
New Jersey	No		
New Mexico	Yes	Act VI-B(3)	30 hrs/Biennially
New York*	No		
North Carolina*	No		
North Dakota*	No		
Ohio*	No		
Oklahoma*	No		
Oregon*	Yes		100 hrs/Biennially
Pennsylvania*	No		
Rhode Island*	No		
South Carolina*	No		

STATE	REQUIRED	CITATION	EXTENT OF EDUCATION
South Dakota*	No		
Tennessee*	No		
Texas*	No		
Utah*	No		
Vermont	Offered, not required.		
Virginia*	No		
Washington	Yes	WAC 308-120-602	15 hrs/Annually
West Virginia*	No		
Wisconsin*	No		
Wyoming	Yes	R Chap II-12	1600 hrs experience in past 5 years (c)
D.C.*	May		
Puerto Rico			

Source: HPLIS/CSG; December 31, 1984

KEY:

* Information obtained from a November 1984 document and may not be current.
a. Depending upon date license became effective.
b. Or 20 hours of inservice education.
c. Or 500 hours during last two years; or completion of a refresher course; or completion of an orientation program; or completion of a nursing program which leads to a degree, or certification in a specialty area of nursing; or completion of the National Licensure Examination; or 20 hours of continuing education.

NURSE PRACTITIONER

Type of State Regulation Forty-three of the states regulate the practice of nurse practitioner. All of these states require that the nurse practitioner first be licensed as a registered nurse (while one state also allows licensed practical nurses to practice in an expanded role of nursing) before completing additional training required for applying to be designated a nurse practitioner.

Scope of Practice States regulate different specialties of nurse practitioners, for example, the school nurse practitioner and the psychiatric nurse practitioner. Each of these specialties' scopes of practice vary from state to state since not every state regulates every specialty. This report is limited to nurse practitioners. An example of a nurse practioner's scope of practice follows:

> NURSE PRACTITIONER PRACTICE (1) Nurse practitioner practice is the management of primary health care of individuals, families and communities including the ability to:
>
> (a) assess the health status of individuals and families through health history taking, physical examination, and defining of health and development problems; (b) institute and provide continuity of health care to clients (patients), work with the client to insure understanding of and compliance with the therapeutic regime within established protocols, and recognize when to refer the client to a physician or other health care provider.
>
> (c) provide instruction and counseling to individuals, families, groups in the areas of health promotion and maintenance, including

involving such person in planning for their health care, and

(d) work in collaboration with other health care providers and agencies to provide, and where appropriate, coordinate services to individuals and families.

Organization of State Regulatory Bodies and Functions Of the 43 states that regulate nurse practitioner, 39 do so through the board of nursing. The other four use a joint board composed of the state's board of nursing and the state's medical board. (See Table VII-10 for full information.)

Twenty-five states specifically mention by statute or regulation that the certifying body is a national certifying agency. The certifying agencies mentioned in statutes include: the American Nurses Association, the American College of Nurse Midwives, the National Board of Pediatric Nurse Practitioners and Associates, the Council on Certification of Nurse Anesthetists, and the Nurses Association of the American College of Obstetricians and Gynecologists Certification Corporation. These organizations each have training and experience requirements which must be met by an individual in order to qualify for certification.

Only one state administers an examination other than the examination given by a national certifying agency. One other state may require an additional examination.

Requirements for Licensure All states provide through law that the applicant may be a graduate of an accredited nurse practitioner program while some states allow alternative training and experience to fulfill the eductional requirements. The most frequent alternative is a master's degree in a nursing clerical specialty. The requirements listed in

Table VII-10 are those necessary to obtain the basic level of nurse practitioner. Many states recognize specialty areas (e.g., South Carolina recognizes an Acute Care Nurse Practitioner, an Advanced Psychiatric-Mental Health Clinical Nurse Specialist, a Certified Registered Nurse Anesthetist, a Community Health Clinical Nurse Specialist, a Family Nurse Practitioner, a Family Planning Nurse Practitioner, and Occupational Health Nurse Practitioner, a Pediatric Nurse Practitioner, and a School Nurse Practitioner) which require additional or different requirements other than those listed under the generic term "nurse practitioner."

Continuing Education Requirements Fourteen states require that the nurse practitioner either document her continuing competency or satisfy the requisite number of continuing education units in order to maintain state certification as a nurse practitioner.

Fee Schedule The fees listed are required by a state and are in addition to the registered nurse licensure fees.

TABLE VII-10

NURSE PRACTITIONER

STATE	AGENCY, REGULATORY BODY, CERTIFYING AGENCY	EXAM	EDUCATION	FEES	CONTINUING EDUCATION	AUTHORIZATION
Alabama	Bd. of Nursing/a	none	c and BS degree	n/a	b	Rules 610-x-9-.08
Alaska	Bd. of Nursing/a	none	c or d	$25/App.	b/30 hrs.	12 AAC 44.400 et seq.
Arizona	Bd. of Nursing/a	May be required	c or i	$75/App	b	R4-19-53
Arkansas	Bd. of Nursing/a	none	(c or e) & f	$25/App. $10/Ren.	b	ASA 72-754(f)
California	Bd. of Nursing/a	none	c or j	n/a	b	Bus. and Prof. Code 2834
Colorado	Bd. of Nursing/a	none	c	n/a	b	CRS 12-38-103(i)
Connecticut	Nurse Practitioners practice under the Nurse Practice Act. Board regulates as to the amount of direction, protocols available and validation.					
Delaware	Bd. of Nursing/a	none	c	n/a	n/a	DCA 1902(d)
Florida	Bd. of Nursing/a	none	c or e	$100/App. $50/Bi	no more than 30 hrs. may be required	FS 464.012
Georgia	Bd. of Nursing/a	none	c & by 1990 e	n/a	b	Rules 410-12.01
Hawaii	Board of Nursing does not regulate. The state does recognize those nurse practitioners who have been certified by a national agency.					
Idaho	Bd. of Nursing and Bd. of Medicine/a	none	c and BS	$75/App. $15/Bi	60 hrs/Bi	ICA 54-1402(d)
Illinois	Not recognized					
Indiana	Bd. has power to regulate, but they have not exercised that power.					
Iowa	Bd. of Nursing/a	none	e & (c)	$12/App. $12/Ann..	b	ICA 152.1(2)(d)
Kansas	Bd. of Nursing/a	none	c & g	$30/App. $15/Bi	30 hrs/Bi	KSA 65-1113(g)
Kentucky	Bd. of Nursing/a	none	c	$70/App.	b	KRS 314.042

$45/Bi

STATE	AGENCY, REGULATORY BODY, CERTIFYING AGENCY	EXAM	EDUCATION	FEES	CON'T ED	AUTHORIZATION
Louisiana	Bd. of Nursing/a	none	h	n/a	b	RN 3.04
Maine	Bd. of Nursing	none	c	n/a	b	32 MRSA 2153
Maryland	Bd. of Nursing	yes (Board approved)	c	n/a	b	ACM 7-302
Massachusetts	Bd. of Registation in Nursing/a	none	c	n/a	b	244CMR 4.00
Michigan	Bd. of Nursing	none	h	n/a	20 hrs/Ann.	R 338.10408.3
Minnesota	Nurse Practitioners practice in the state. They are not regulated by the Board of Nursing.					
Mississippi	Bd. of Nursing	none	c & k	---	as established by the Board.	MCA 73-15-5(a) & (b)
Missouri	State does not regulate.					
Montana	Bd. of Nursing	none	(l & c) or (e & a)	$25/App. $5/Ann.	b	R 8.32.305(b)
Nebraska	Bd. of Nursing/Bd. of Examiners in Medicine and Surgery/a	none	c & d	$25/App. $20/Renewal	b	NRS 71-1,704 et seq.
Nevada	Bd. of Nursing/a	none	m	$60/App. $30/Renewal	documentation of skill maint.	NAC 632.295
New Hampshire	Bd. of Nursing/a	none	c	$5/license* $2/Bi*	15hrs.	RSA 326-B:10
New Jersey	Bd. of Nursing/a	none	c or e	n/a	b	NJ Bd. of Nursing Guidelines
New Mexico	Bd. of Nursing/a	none	c or e	n/a	70hrs/Bi	Rules Art.IV sec. B
New York	State does not regulate.					
North Carolina	Bd. of Nursing	none	individual review			
North Dakota	Bd. of Nursing	none	c	$50/App. $10/Bi		Rules 54-05-03-06
Ohio	State does not regulate.					
Oklahoma	Bd. of Nursing/a	none	c	$85/App. $20/Bi	b	Rules Art.X sec. 1

STATE	AGENCY, REGULATORY BODY, CERTIFYING AGENCY	EXAM	EDUCATION	FEES	CON'T ED	AUTHORIZATION
Oregon	Bd. of Nursing/a	none	c	$131/App. $39/Bi	100hrs/Bi	ORS .78.375
Pennsylvania	Bd. of Nursing	none	c	n/a	continuing competency	Rules Subchapter E, sec.17.101
Rhode Island	State does not regulate.					
South Carolina	Bd. of Nursing/a	none	c	n/a	n/a	CLSC 40-33-510
South Dakota	Bd. of Nursing & Bd. of Medical & Osteopathic Exam.	none	c	$75 app. $30/2yrs	n/a	SDCL 36-9A-2
Tennessee	Bd. of Nursing	none	c or e	n/a	b	Rules 1000-4.03
Texas	Bd. of Nurse Exam.	none	c	n/a	b	22 TAC 221
Utah	Bd. of Nursing	none	c	n/a	400 practice hours	UCA 58-31-2
Vermont	Bd. of Nursing/a	none	c	n/a	b	Rule N11-03
Virginia	Bd. of Medicine Bd. of Nursing/a	none	c	$25/App. $10/Renewal	b	Regulations I sec. 2
Washington	Bd. of Nursing/a	none	c	$25/App. $20/Ann.	30 hrs/Bi	WAC 308-120-300
West Virginia	Recognized under the Nurse Practice Act but there are no rules established.					
Wisconsin	Board of Nursing is responsible for entry level only. N 10-03(2) allows nurse practitioners to practice beyond the scope of their R.N. license.					
Wyoming	Bd. of Nursing	none	1. c 2. a	$100/App. $50/Bi	1. 60hrs 2. b	Chapter IV

Source: HPLIS/CSG; December 31, 1984

KEY:

* Information taken from a December 1982 document and may not be current.

a Certification by a national agency.

b May be required by the certifying agency.

c Successful completion of a nurse practitioner educational program, which includes didactic and clinical experience.

d A formal course of study which may not offer a degree, or may not include classroom and practical education, but the applicant has performed an expanded role in the health care for at least 12 months during the 18 months preceding 1/13/80.

e Master's degree in a nursing clinical specialty.

f Preceptorship required.

g
  1. Complete a course of studies which leads to an advanced degree in nursing or to national certification; or
  2. Complete a program accredited by a national certifying agency recognized by the Bd. of Nursing; or
  3. Complete a program which is individually recognized by the board.

h Completion of a formal advanced program in a nurse practitioner specialty field which meets the guidelines of the U.S. Department of Health, Education and Welfare.

i Individuals may apply with a reasonable substitute course of study of the course requirements are substantially the equivalent to those listed in the Rules and Regulations pertaining to a specialty area.

j A nurse who has not completed a N.P. program which meets the Board standards, shall be able to provide (1) documentation of areas of deficiency in course content and/or divided experience; and (2) verification by a N.P. and by a physician who meet the requirementsfor faculty members specified in Section 1984 (c), of clinical competence in the delivery of primary health care.

k LPN's may also practice in an expanded role upon recommendation by the Director of Nursing Services of employing agency, completion of two full years of clinical nursing in hospital or skilled nursing home, and completion of the applicable program approved by the Mississippi Board of Nursing.

l Complete a Bachelor's degree in nursing.

m Must meet one of the following:
  1. Be a graduate of a program designed to prepare an advanced practitioner, and is approved by the American Nurses Association, the National League of Nurses, or another professional organization recognized by the board, or
  2. Complete a formal one year program designed to prepare nurses for extended practice, or
  3. Hold a current certificate as an advanced nurse practitioner issued by the ANA, or
  4. Equivalent qualifications approved by the board.

CERTIFIED NURSE MIDWIFE

Type of State Regulation Forty-six states regulate the practice of certified nurse midwives. All of these states require that the nurse midwife be licensed as a registered nurse. There are states which recognize lay-midwives, but this survey is limited to certified nurse midwives.

Scope of Practice All states regard the nurse-midwife as a specialty area and identify a scope of practice for nurse-midwifes. An example of the scope of practice for nurse-midwife is taken from Montana:

> NURSE-MIDWIFERY PRACTICE (1) Nurse-midwifery practice is the independent management of care of essentially normal newborns and women, antepartally, intrapartally, postpartally and/or gynecologically. This occurs within a health care system which provides for medical consultation, collaborative management, and referral and is in accord with the "Functions, Standards and Qualifications for Nurse-Midwifery Practice" as defined by the American College of Nurse-Midwives, 1522 K Street NW, Suite 1120, Washington, D.C. 20005.

This statute is representative of states' scope of practice in that the care is limited to normal pregnancies, and the nurse-midwife is given independent management of the patient's care, subject only to her working within a health care system. Montana, like many other states relies in part upon the American College of Nurse-Midwives' "Functions, Standards and Qualifications for Nurse-Midwifery Practice".

Organization of State Regulatory Bodies and Functions Thirty of the states regulate nurse midwifery through the states' board of nursing, five use the medical board, five states use a joint board composed of the states' board of nursing and the states' medical board, two use a nurse-midwifery council, and four more regulate nurse midwifery through the department of health. (See Table VII-11 for full infomation.)

Forty-five states have expressly adopted certification by a national agency as a requirement for practice within their state. The American College of Nurse Midwives is the national agency mentioned by most of the statutes and/or regulations. The Nurses Association of the American College of Obstetricians and Gynecologists was also mentioned as a recognized certifying agency. The importance of these national agencies is apparent in that only four states administer an examination to certify the nurse midwife while the others use the exam administered by one of the two national agencies.

Requirements for Licensure All states require that the applicant for nurse midwife complete an approved nurse midwife program. Four states provide applicants the option of submitting a masters degree which includes education in midwifery as a specialty course of study in lieu of completing a midwife training program.

Continuing Education Requirements Thirteen states require continuing education or skill maintenance in order to renew their state certification.

Fee Schedule The fees for the application and the renewal of the state certification are listed. These fees are in addition to those fees required for a registered nurse.

TABLE VII-11

NURSE MIDWIFE

STATE	AGENCY	EXAM	EDUCATION	FEES	CON'T ED.	AUTHORIZATION
Alabama	Bd. of Nursing/ Bd. of Medical Exam./a	none	c	n/a	none	AC 34-21-2(1)
Alaska	Bd. of Nursing/a	none	a,d	$25/App $25/Renewal	30 CEU's/Bi	12 AAC 44.400 et. seq.
Arizona	Bd. of Nursing/a	yes (e)	c	n/a	none	R 4-19-55
Arkansas	Bd. of Nursing/a Nurse Midwife Cmte. (2 CNM & 2 MD's)	none	a,c	n/a	none	ASA 72-2201
California	Bd. of Regist. Nurses	yes	m	n/a	none	Bus. & Prof. Code 2746
Colorado	Bd. of Nursing/a	none	c	n/a	none	Rules Chapter VII
Connecticut	Midwifery Cmte./a (3 CNM)	none	c	n/a	none	Public Act 83-441
Delaware	Bd. of Nursing/a	none	c	n/a	none	DCA. 1902
Florida	Bd. of Nursing/a	none	c or h	$100 App. $50/Bi	no more than 30 hours/Bi	FS 464.012
Georgia	Bd. of Nursing/a	none	c	$50/App $30/Bi	none	Rules 410-12.03
Hawaii	Dept. of Health/a	none	c	$15 app. $3/1 yr.	b	Pub. Health Reg. Chapt. Six
Idaho	Bd. of Nursing & Bd. of Medicine	none	c	$75 app. $15 renewal	60 hrs.	ICA 54-1402(d)
Illinois According to the ACNM* the	State does not regulate. following applies to Illinois; Dept. of Registration and Education	none	c	n/a	none	111 IRS 3401
Indiana	Medical Licensing Bd/a	none	c	n/a	none	IC 25-22.5-2-7
Iowa	Bd. of Nursing/a	none	c or h	$12 app $12 yrly	15 hrs/Ann	ICA 152.1(2)(d)
Kansas	Bd. of Nursing/a	none	c	$30 app. $15/2 yrs.	30 hrs/Bi	KSA 65-113(g)

STATE	AGENCY	EXAM	EDUCATION	FEES	CON'T ED.	AUTHORIZATION
Kentucky	Bd. of Nursing/a	none	c	$70 app. $45/2 yr	none	KRS 314.042
Louisiana	Bd. of Nursing/a	none	i	n/a	none	RN 3.042
Maine	Bd. of Nursing/a	none	c	n/a	none	32 MRSA 2153
Maryland	Bd. of Examiners of Nurses/a	none	c	n/a	none	MCA 7-601
Massachusetts	Bd. of Registration in Nursing/a	none	c	n/a	none	244 CMR 4.11
Michigan	Bd. of Nursing/a	none	c	n/a	20 hrs/Ann	R 338.10408.2
Minnesota According to the ACNM* the following applies;	State does not regulate. Bd. of Nursing	none	c,g	n/a	RN CEU's	MSA sec. 148.171
Mississippi	Bd. of Nursing/a	none	c	n/a	b/Bd of Nurs. requires 40hrs/Bi	Standards of Practice
Missouri According to the ACNM* the following applies;	Bd. of Nursing does not regulate. Bd. of Nursing	none	no mention	n/a	none	RSMo 335
Montana	Bd. of Nursing/a	none	c	$25/App $5/Ann	none	MCA 37-8-409
Nebraska	Bd. of Nursing and Bd. of Examiners in Medicine & Surgery/a	none	c	$25 App. $10 annually	none	NRS 71-1738
Nevada	Bd. of Nursing	none	c or d	n/a	skill maint.	NAC 632.250
New Hampshire	Bd. of Nursing/a	none	c	n/a	15 hrs yearly	RSA 326.B-10
New Jersey	Bd. of Med. Exam./a	none	c and g	$25 app. $5 annually	none	NJSA 45:10-1
New Mexico	Director of Health Services Division of the Health and Envir. Dept./a	none	c	$15/App $15/Bi	none	NMSA 24-1-3
New York	Dept. of Health/a	none	c	none	Documentation of deliveries.	Pub Health 225
North Carolina	Bd. of Med. Exam. & Bd. of Nursing/a	none	c	$50 app $25 annually	none	NC 90-178.1

STATE	AGENCY	EXAM	EDUCATION	FEES	CON'T ED.	AUTHORIZATION
North Dakota	State does not regulate Certified Nurse Midwives. CNM's practice with the U.S. Air Force.					
Ohio	State Medical Bd./a	none	c	$100 app $5 annually	none	ORCA 4731.01
Oklahoma	Bd. of Nurse Reg. & Nursing Education/a Advisory Cmte. (3 CNM & 1 MD)	none	c	$50 app. $20 renewal	none	59 OS 577.1
Oregon	Bd. of Nursing Advisory Cmte.(3 MD's, 3 Pharmacists & 3 Nurses)	none	c	$131 app. $39 annually	100 hrs/Bi	OAR 851-30-001
Pennsylvania	Bd. of Med. Ed.& Lic.	none	c	$50 app.	none	63 PS 171-176
Rhode Island	Dept. of Health Adv. Counc. of Mid.	yes j,f	c,g	none	k	GSRI 23-13-9
South Carolina	Bd. of Nursing/a	none	c	none	none	SCA 43-33-10 Statements of Determinates
South Dakota	Bd of Nursing/ Bd. of Medical & Osteopathic Examiners	none	c	$75/App $30/Bi	none	SDCL 36-9A
Tennessee	Bd. of Nursing/a	none	1	none	none	BON Rules 1000-4
Texas	Bd. of Nurse Exam.	none	c	none	none	TSA 4518
Utah	Cmte. of CNM (2 CNMs & 1 public)	none	c	none	none	UCA 58-44-1
Vermont	Bd. of Nursing & Bd. of Medical Practice/a	none	c	none	none	VSA 1574(4)
Virginia	Bds. of Nursing & Bd. of Medical Exam./a	none	c	$25 app $10 renewal	none	VC 54-274
Washington	Bd. of Nursing/a	none	c,d	$25/App $20/Bi	30 hrs/Bi	WAC 308-120-300
West Virginia	Bd. of Examiners for Registered Nurses/a	none	a	$20 app $10 renewal	none	WVC 30-15-1
Wisconsin	Bd. of Nursing/a	none	c	$50 app $35 renewal	none	WSA 441.15
Wyoming	Bd. of Nursing/a	none	c	$100 app $50 renewal	60 hrs	Chapt. IV of the Bd. of Nur.Rules

STATE	EXAM	AGENCY EDUCATION	FEES	CON'T ED.		AUTHORIZATION	
D.C.		Bd. of Nursing	none	unclear	n/a	none	DCA 2-1701 et. seq.

Source: HPLIS/CSG; December 31, 1984

KEY:

* ACNM = American College of Nurse Midwives

a American College of Nurse Midwifery or other national agency certification.

b The certifying agency may require.

c Complete an approved certified nurse midwifery program.

d Complete a formal education program which is one academic year in length.

e Board may waive the exam for those holding ACNM certification.

f Nationally recognized exam.

g Complete clinical preparation acceptable to the Board.

h Master's degree in the specialty area.

i 1. Complete a course of studies which leads to an advanced degree in nursing or to national certification; or
2. Complete a program which is accredited by a national certifying agency recognized by the Board of Nursing; or
3. Complete a program which is individually recognized by the Board of Nursing.

j A written and/or an oral exam may be used.

k Documentation of the practice of midwifery in previous two years including the performance or supervision of four deliveries, or a refresher course is required.

l Complete a formal educational program of one academic year which prepares the nurse for a specialized practice; or graduation from a program conferring a Master's degree in a nursing clinical specialty area. Both of these programs must require preparation in specialty skills which consist of three quarter hours of pharmacology instruction; or ACNM or NAACOG certification.

m Applicant must: (1) Be a graduate of a board approved program in Nurse-Midwifery, or
(2)(a) Graduate of a program not approved by the board if the deficiencies have been corrected, or
(b) Certification by a national or state agency whose standards are satisfactory to the board, or
(c) The applicant demonstrates clinical competency.

CHAPTER IX

STATE REGULATION OF OCCUPATIONAL THERAPY

OCCUPATIONAL THERAPIST

Type of State Regulation Thirty states and territories regulate occupational therapists through licensure. No other type of state regulation has been enacted. (See Table VIII-1). (Montana is the newest entry into the field of occupational therapy licensure and is not included in this report.)

Scope of Practice The scope of practice of occupational therapy is largely uniform throughout the United States. The Occupational Therapy Association's Model Practice Act offers a representative example:

> "Occupational Therapy" is the use of purposeful activity with individuals who are limited by physical injury or illness, psychosocial dysfunction, developmental or learning disabilities, poverty and cultural differences or the aging process in order to maximize independence, prevent disability and maintain health. The practice encompasses evaluation, treatment and consultation. Specific occupational therapy services include: teaching daily living skills; developing perceptual-motor skills and sensory integrative functioning; developing play skills and prevocational and leisure capacities; designing, fabricating, or applying selected orthotic and prosthetic devices or selective adaptive equipment; using specifically designed crafts and exercises to enhance functional performance; administering and interpreting tests such as manual muscle and range of motion; and adapting environments for the handicapped. These services are provided individually, in groups,

or through social systems.

There is no substantial difference between the states in the manner in which their occupational therapists practice. This uniformity is possible in large part due to the national association's efforts in developing a model practice Act before many states passed licensure statutes.

Organization of State Regulatory Bodies and Functions Occupational therapy is regulated by diverse structures across the states (see Table VIII-2). Nineteen states have a board of occupational therapy, five states regulate occupational therapy through medical boards, five states have combined boards such as physical and occupational therapy, and one state regulates by an administrator. The size and make-up of the various structures is set out in Table VIII-2. Only two boards are made up exclusively of occupational therapists, while twenty-one states have public members on the boards.

Most of the states reserve to the board the power to issue licenses and promulgate rules and regulations. About half the states give the boards the power to accredit or approve educational programs, while the other states recognize educational programs approved by the American Occupational Therapy Association or the American Medical Association. (See Table VIII-3).

All of the boards have the power to suspend and revoke a practitioner's license, and most can probate the license. Few other sanctions are available to boards. For a complete list of sanctions by state, see Table VIII-4.

All of the states use the AOTA Certification Examination administered by Assessment Systems, Inc. (See Table VIII-5).

Requirements for Licensure All states require that the applicant satisfactorily complete an accredited occupational therapist educational program. In addition, to this all of the states require a six-month internship. Most states require that the applicant be of good moral character. Few states have an age requirement. (See Table VIII-6).

Continuing Education Requirements Only seven states require continuing education credits as a condition of license renewal while fourteen states have passed enabling legislation for continuing education. (See Table VIII-9).

Interstate Recognition of Credentials Most states (i.e. 22) endorse licensed occupational therapists from other states which have substantially equivalent licensure requirements. (See Table VIII-8).

Fee Schedule Fee levels for six types of fees are shown in Table VIII-7.

TABLE VIII-1

OCCUPATIONAL THERAPIST

TYPE OF STATE REGULATION

STATE	TYPE	CITATION
Arkansas	Licensure	Med.Prac.Act Reg.6.3
Connecticut	Licensure	CGS 20-376a-74b
Florida	Licensure	FS 468.207
Georgia	Licensure	OCG 43-28.8
Illinois	Licensure	111 IRS 3703
Iowa	Licensure	IC 148B.2
Louisiana	Licensure	RS 37:3005
Maine	Licensure	32 MRSA 2276
Maryland	Licensure	ACM 9-301
Massachusetts	Licensure	ALM 112-23B
Nebraska	Licensure	RS 71-6104
New Hampshire	Licensure	RSA 326-C:2
New Mexico	Licensure	NMSA 61-12A-3
New York	Licensure	CLNYA 156.7902
North Carolina	Licensure	GSNC 90-270.67(2)
North Dakota	Licensure	NDCC Section 2
Ohio	Licensure	ORCA 4755.07
Oklahoma	Licensure	59 OS 888.3
Oregon	Licensure	ORS 675-230
Pennsylvania	Licensure	Act 1982-140 section 6
Rhode Island	Licensure	GLRI 5-40.1-6
South Carolina	Licensure	CLSC 40-36-30
Tennessee	Certification*	TCA 210
Texas	Licensure	TCS 8851.2(2)
Utah	Licensure	UCA 58-42-4
Washington	Licensure	RCW 18.59.030
West Virginia	Licensure	WVC 30-28-4
D.C.	Licensure	DCCA 2-1705.3
Puerto Rico	Licensure	Act No. 137 section 2

Source: HPLIS/CSG; December 31, 1984

* Although this is designated in the state law as certification, according to this study's definition of licensure, certification and registration, it is in effect licensure.

TABLE VIII-2

OCCUPATIONAL THERAPIST

ORGANIZATIONAL PATTERN OF STATE REGULATORY BOARDS

STATE	NAME OF BOARD & DEPARTMENT	NO. OF BOARD MEMBERS PROF.	PUB.	OTH.	TOTAL	CITATION
Arkansas	O.T. Examining Committee Ark.St.Medical Board	4	1	0	5	Act 72-1904
Connecticut	Commissioner of Health Services Division of Medical Quality Assurance Dept of Health Services					
Florida	Occupational Therapist Council Bd. of Medical Examiners	All	0	0	?	FS 468.205
Georgia	State Board of Occupational Therapy	5	1	0	6	OCG 43-28-4
Illinois	Illinois Occupational Therapy Bd. Dept of Registration and Education	3	1	3b	7	111 IRS 3705
Iowa	Bd.of P.T.& O.T. Examiners Dept. of Health	5i	2	0	7	IC 470-138.200
Louisiana	St. Bd. of Medical Examiners Dept. of Health & Human Resources	0	0	7f	7	RS 37:1263
Maine	Bd of Occupational Therapy Practice Dept of Bus., Occ. & Pro. Regulation	3	1	1a	5	32 MRSA 2273
Maryland	State Bd of Occ Therapy Practice Dept. of Health & Mental Hygiene	3	1	1a	5	ACM 9-202
Massachusetts	Bd. of Allied Health Professions	10j	1	0	11	
Nebraska	Bd. of Occupational Therapy Practice Dept. of Health	3	1	0	4	R.S.N.71-6115
New Hampshire	Advisory Committee Bd. of Registation in Medicine	2	0	2e	4	RSA 326-c:12
New Mexico	Bd. of Occupational Therapy Practice	4	1	0	5	61-12A-5 NMSA

		NO. OF BOARD MEMBERS				
STATE	NAME OF BOARD AND DEPARTMENT	PROF.	PUB.	OTH.	TOTAL	CITATION
New York	St. Bd. for Occupational Therapy State Education Department	7	0	2g	9	CLNYA 156.7903
North Carolina	Board of Occupational Therapy	3	1	2h	6	GSNC 90-270.68
North Dakota	Bd. of Occupational Therapy Practice	4	0	1a	5	NDCC Sec. 4
Ohio	Ohio Occupational Therapy and Physical Therapy Board(see c)	4	1	0	5	ORC 4755.03
Oklahoma	O.T. Advisory Committee Bd. of Medical Examiners	3	1	1a	5	59 OS 888.12
Oregon	Occupational Therapy Licensing Bd Health Division	3	2	0	5	ORS 675.310
Pennsylvania	St Bd of Occ Therapy Ed and Licensure Bureau of Prof & Occupational Affairs of the Dept of State	5	2	0	7	Act 1982-140 Sec. 4
Rhode Island	Bd of Occupational Therapy Practice State Dept. of Health	3	1	1	5d	GLRI 5-40.1-4
South Carolina	Bd. of Occupational Therapy	3	1	1a	5	CLSC 40-36-60
Tennessee	St. Bd. of Occ. & P.T. Examiners	3	1	3	7	TCA 63-13-103
Texas	Advisory Bd. of O.T. Texas Rehabilitation Commission	3	2	1a	6	TCS 8851.3
Utah	Bd of Occupational Therapy Practice Dept. of Business Regulation	5	0	0	5	UCA 58-42-14
Washington	Bd of Occupational Therapy Practice Dept. of Licensing	3	1	1a	5	RCW 18.59.120
West Virginia	Bd. of Occupational Therapy	3	1	1a	5	WVC 30-28-5
D.C.	Bd. of O.T. Practice Dept. of Consumer & Regulatory Affairs	4	2	1a	7	DCCA 2-1705.5

		NO. OF BOARD MEMBERS				
STATE	NAME OF BOARD AND DEPARTMENT	PROF.	PUB.	OTH.	TOTAL	CITATION
Puerto Rico	Bd of Examiners of Occupational Therapy Div of Bds of Examiners of the Dept of State	4	0	1a	5	Act 137 sec 3

Source: HPLIS/CSG; December 31, 1984

KEY:

a Occupational Therapy Assistant
b One licensed physician and two certified occupational therapy assistants
c Total of ten on Board; five on O.T. section and five on P.T. section
d Physician licensed in state
e One O.T. assistant and one physician
f All members shall be graduate physicians or surgeons and practitioners
g One physician and one hospital administrator.
h One Occupational Therapist Assistant and one licensed physician who specializes in Othopedic medicine.
i Three physical therapists and two occupational therapists.
j Three athletic trainers, two occupational therapists, two physical therapists, one occupational assistant, one physical therapist's assistant and one physician.

TABLE VIII-3

OCCUPATIONAL THERAPIST

FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	ISSUE LICENSE	ACCREDIT EDUCATION	PROMULGATE REGULATIONS
Arkansas	Committee	AMA+AOTA	Medical Board
Connecticut	Department	AOTA	Commissioner of Health Services
Florida	Board		Bd/AMA+AOTA
Georgia	Board		Bd/AMA+AOTA
Illinois	Department	Department	Department
Iowa	Board		Bd/AMA+AOTA
Louisiana	Board		Board
Maine	Board	Bd/AMA+AOTA	Board
Maryland	Board	Bd/AMA+AOTA	Board
Massachusetts	Board		Board
Nebraska	Department	Dept/AMA+AOTA	Department
New Hampshire	Comm/Bd		Board
New Mexico	Board		Board
New York	Bd/Dept		Department
North Carolina	Board	Board	Board
North Dakota	Board	Board	Board
Ohio	Board	OT Sec of Bd	Board
Oklahoma	Board	Bd/AMA+AOTA	Board
Oregon	Board	Board	Board
Pennsylvania	Board	Bd/AOTA	Board
Rhode Island	Board	Bd/AMA+AOTA	Board
South Carolina	Board	Bd/AMA+AOTA	Board
Tennessee	Committee	Comm/AMA+AOTA	Board
Texas	Board	Board	Board
Utah	Board	Board	Board
Washington	Board	Board	Board
West Virginia	Board	Bd/AMA+AOTA	Board
D.C.	Board	Board	Board
Puerto Rico	Board	*	Board

Source: HPLIS/CSG; December 31, 1984

KEY:

AMA - American Medical Association
AOTA - American Occupational Therapy Association
* - Education in P.R. accredited by the Council of Higher Education of the University of P.R. Education outside of P.R. accredited by the AMA in collaboration with the AOTA.

TABLE VIII-4

OCCUPATIONAL THERAPIST

ENFORCEMENT FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	CITATION	SUSPEND	REVOKE	LICENSE	CENSURE	RESTRICT REPRIMAND	PROBATION	FINE	OTHER
Arkansas	Act 72-1914	x	x						
Connecticut	CGS 20-376a-74g	x	x				x		
Florida	FS 468.217	x	x				x		
Georgia	OCG 43-28-13	x	x				x		
Illinois	Ill IRS 3719	x	x		x	x	x		a
Iowa	IC 470-138.212	x	x				x		
Louisiana	RS 37:3011	x	x				x		
Maine	32 MRSA 2276.3	x	x						b
Maryland	MCA 9-314	x	x		x	x			
Massachusetts	ALM 112-23K	x	x	x		x	x		a
Nebraska	RSN 71-6111	x	x						a
New Hampshire	RSA 326-C:9	x	x				x		
New Mexico	NMSA 61-12A-11	x	x				x		
North Carolina	GSNC 90-270.76	x	x				x		
North Dakota	NDCC 16.2	x	x				x		
Ohio	ORCA 4755.10	x	x						
Oklahoma	59 OS 888.9	x	x		x		x		
Oregon	ORS 675.300	x	x				x		
Pennsylvania	PS 140 sec 16	x	x				x		
Rhode Island	GLRI 5-40.1-14	x	x				x		
South Carolina	CLSC 40-36-160	x	x				x		
Tennessee	TCA 63-13-207	x	x						a

						RESTRICT			
STATE	CITATION	SUSPEND	REVOKE	LICENSE	CENSURE	REPRIMAND	PROBATION	FINE	OTHER
Texas	TCSA 8851.30	x	x						a
Utah	UCA 58-42-10	x				x			
Washington	RCW 3074 sec 11	x	x					x	
West Virginia	WVC 30-28-13	x	x					x	
D.C.	DCCA 2-1705.12	x	x					x	
Puerto Rico	137 sec 10				x	x			

Source: HPLIS/CSG; December 31, 1984

KEY:

x Board has the power.
a. May take other disciplinary action.
b. May modify license.

TABLE VIII-5

OCCUPATIONAL THERAPIST

EXAMINATION OF APPLICANTS

STATE	WRITTEN EXAM USED	ORAL	PRACTICAL	CITATION
Arkansas	x			Act 72-190
Connecticut	x			CGS20-376a-74
Florida	x			FS 468.211
Georgia	x			OCG 43-28-10
Illinois	x			Ill IRS 3707
Iowa	x			ICA 138.206
Louisiana	x			LRS 37:3007
Maine	x			32 MRSA 2280
Maryland	x			MCA 9-305
Massachusetts	x			ALM 112-23G
Nebraska	x			RSN 71-608(2)
New Hampshire	x			NHRSA 326-C:4
New Mexico	x			61-12A-13 NMSA
New York	x			CLNYA 156.7904
North Carolina	x			GSNC 90-270.71
North Dakota	x			NDCC 11.2
Ohio	x			ORCA 4755.06
Oklahoma	x			59 OS 888.7
Oregon	x			ORS 675.260
Pennsylvania	x			Act '82-140.11
Rhode Island	x			GLRI 5-40.1-10
South Carolina	x			R 36.11
Tennessee	x			TCA 63-13-202
Texas	x			TCSA 8851.17
Utah	x			UCA 58-42-7
Washington	x			RCW 18.59.060
West Virginia	x			WVC 30-28-9
D.C.	x			DCCA 2-1705.8
Puerto Rico				

Source: HPLIS /CSG; December 31, 1984

KEY:

x All of the states use the AOTA Certification Examination, administered by Assessment Systems, Inc.

TABLE VIII-6

OCCUPATIONAL THERAPIST

INITIAL REQUIREMENTS FOR LICENSE APPLICANTS

STATE	CITATION	EDUCATION	INTERN[1]	MORALS	WORK EXP.	AGE	CIT.	RES.
Arkansas	Act 72-1907	x	6 mos.	a		18	yes	
Connecticut	CGS20-376a-74b	x	6 mos.	a	yes			
Florida	FS 468.209	x	6 mos.	a	yes			
Georgia	OCG 43-28-9	x	6 mos.	a	yes			
Illinois	111 IRS 3708	x	6 mos.		yes		yes	
Iowa	ICA 148B5	x	6 mos.		yes			
Louisiana	LRS 37:3006	(b)		a				
Maine	32 MRSA 2279	x	6 mos.		yes			no
Maryland	ACM 9-302	x	6 mos.	a	yes	18		
Massachusetts	ALM 112-23G	x	(c)					
Nebraska	RS 71-606	x	6 mos.		yes			no
New Hampshire	RSA 326-C:3	x	6 mos.	a	yes	18		
New Mexico	NMSA 61-12A-13	x	6 mos.	a				
New York	CLNYA 156.7904	x	6 mos.	a	yes	21	no	
North Carolina	GSNC 90-270	x	6 mos.	a	(d)			
North Dakota	NDCC Sec. 8	x	6 mos.	a	yes			
Ohio	ORCA 4755.06	x	6 mos.	a	yes			
Oklahoma	59 OS 888.6	x	6 mos.	a				
Oregon	ORS 675.240	x	6 mos.		yes			
Pennsylvania	Act 1982-140-8	x	6 mos.	a				
Rhode Island	GLRI 5-40.1-8	x	6 mos.	a	yes			
South Carolina	CLSC 40-36-120	x	6 mos.	a	yes			
Tennessee	TCA 63-13-202	x	6 mos.	a				
Texas	TCA 885.16	x	6 mos.	a				no
Utah	UCA 58-42-6	x	6 mos.	a	yes			
Washington	WAC308-171-300	x	6 mos.	a	yes			
West Virginia	WVC 30-28-8	x	6 mos.	a				
D.C.	DCCA 2-1705.7	x	6 mos.	a	yes			
Puerto Rico	Act 137-5	**					yes	

Source: HPLIS/CSG; December 31, 1984

KEY:

1 An Internship is defined as a supervised work experience.
x Successful completion of an accredited occupational therapy educational program approved by the board.
a Good moral behavior
b Has successfully completed the academic and supervised field work experience

requirements to sit for the "Certification Examination for Occupational Therapist, Registered"

c As stipulated in the accredited educational program (which is six months).

d Must file an application before September 1, 1985

** O.T. program accredited by the Council of Higher Education of the University of Puerto Rico or by the American Medical Association or American Occupational Therapy Association.

TABLE VIII-7

OCCUPATIONAL THERAPIST

SCHEDULE OF FEES

STATE	APP.	EXAM*	RENEWAL	TEMP	DUP	RECIPROCAL
Arkansas	$50		$3/An	$5		$50
Connecticut	$25b	$15	$25/Bi			$50
Florida**			$20/Bi			
Georgia	$60		$50/Bi		$15	
Illinois	$25	c	$20/An		$10	$50
Iowa	$55		$55		$10	
Louisiana	$50a	$25ab	$25a/An	$25a		$75a
Maine	$80		$80/Bi	$25		
Maryland						
Massachusetts						
Nebraska		$100a	$80a/Bi	$25	$5	$80a
New Hampshire	$25ab	$50a	$25a/An			
New Mexico	$75ba					
New York		$80	$60/Bi			$65e
North Carolina		$10a	$100a	$50/An		
North Dakota	$40b	d/An				
Ohio	$100a	$50a	$25a/Bi			
Oklahoma	$50a		$20a/An			
Oregon	$50a+b	$100a	$50a/An			$50
Pennsylvania						
Rhode Island	$50		$20/Bi			
South Carolina			$75	$20/An	$35	$5
Tennessee	$100a	$100a	$100a			$100a
Texas	$10	$100b	$100/An	$9 mo.		
Utah	$10a	$50a	$10a/An			$25a
Washington						
West Virginia						
D.C.						
Puerto Rico		$15				

Source: HPLIS/CSG; December 31, 1984

KEY:

* The AOTA has informed this study that none of the states collect the exam fee. This fee of $100 is payed directly to the Assessment Sytems, Inc. which then administers the exam.

** This information is taken from a December 1982 document and may not be current.

a Not to exceed

b Licensure fee

c Fee may be required

d Shall not exceed the initial licensure fee

e For initial licensure fee for persons not required to take exam

TABLE VIII-8

OCCUPATION THERAPIST

RECIPROCITY AND ENDORSEMENT

STATE	TYPE	CONDITIONS	CITATION
Arkansas	Reciprocity	a+b	Act 72-1912
Connecticut	Endorsement	a or e or f	CGS 376a-20-74c
Florida	Endorsement	a or e or f	FS 468.213
Georgia	Endorsement	a or e or f	OCG 43-28-11
Illinois	Endorsement	a	111 IRS 3713
Iowa	Endorsement	a or f	IC 148.B6
Louisiana	Reciprocity	a+b	RS 37:3008B
Maine	Endorsement	g	32 MRSA 2281
Maryland	Endorsement	a or e or f	ACM 9-306
Massachusetts			
Nebraska	Endorsement	a	RS 71-6109(3)
New Hampshire	Endorsement	a or d	RSA 326-C:5
New Mexico	Endorsement	a	NMSA 61-12A-14.
New York			
North Carolina	Endorsement	a	GSNC 90-270.72
North Dakota	Endorsement	a or e or f	NDCC Sec. 12.2
Ohio	Endorsement	a	ORCA 4755. 08
Oklahoma	Endorsement	h	Rule 2
Oregon	Endorsement	a or i	ORS 675.270
Pennsylvania	Endorsement	a or i	Act 1982-140sec 12
Rhode Island			
South Carolina	Endorsement	a	CLSC 40-36-140
Tennessee	Endorsement	a	TCA 63-13-212
Texas	Endorsement	a	TCSA 8851.18
Utah			
Washington	Endorsement	a	RCW 18.59.070(2)
West Virginia	Endorsement	a	WVC 30-28-10
D.C.	Endorsement	a	DCCA 2-1705.9(b)
Puerto Rico	Reciprocity	c	Act 137 sec 6

Source: HPLIS/CSG; December 31, 1984

KEY:

a License may be granted to a person licensed in another state, provided that the other state's requirements are substantially equivalent to those of this state.

b State will grant license only if applicant's state reciprocates.

c The Board will establish reciprocity relations directly with individual states or countries through the conditions and requirements it may deem necessary.

d Applicant has passed a qualifying examination.

e In CT, if certified by the AOTA as an Occupational Therapist Registered (OTR), on or before 7/1/79.
In FL, if prior to effective date of Occupational Therapy Act.
In GA, if prior to 7/1/76.
In MD, if prior to 7/1/79.
In ND, if prior to 7/1/83.

f In CT, if certified by the AOTA as an OTR after 7/1/79, license MAY be granted without an examination, if the Board considers the requirements for such certification equivalent to the requirements of this Act.
In FL if after effective date of Occupational Therapy Act.
In GA if after 7/1/76.
In IA if PRIOR to 1/1/81.
In MD if after 7/1/79.
In ND if after 7/1/73.

g If prior to 4/12/84, applicant has successfully completed an exam administered by the Psychological Corp. under contract with the AOTA, and meets the requirements of this state.

h If licensed by examination in another state, District of Columbia, or Puerto Rico, provided exam was that of the AOTA or any other group approved by the Board. If applicant has not practiced as an OT during the year prior to application, a personal interview may be required.

i Meets the requirements of this act and is currently certified as an OTR by the AOTA.

TABLE VIII-9

OCCUPATIONAL THERAPIST

CONTINUING EDUCATION REQUIREMENTS

STATE	REQUIRED	CITATION	Extent of Education
Arkansas	May	Reg. 6.3(5)	Established by Commissioner
Connecticut	Yes	CGS 20-376a-74h	
Florida	No		
Georgia	May	OCG 43-28-14	**
Illinois	No		
Iowa	Yes	R 470-138.210	30 hrs. per biennium
Louisiana	Yes	LRS 37:3012B	Established by Bd.
Maine	Yes	32 MRSA 2283.3	Evidence of cont. competencies
Maryland	Yes	ACM 9-311	**
Massachusetts	May	ALM 112-23B	
Nebraska	No		
New Hampshire	May	RSA 326-C.7	**
New Mexico	Yes	R Sec. 3	10 hrs. per year (a)
New York	No		
North Carolina*	No		
North Dakota	May	NDCC 15.2	**
Ohio	No		
Oklahoma	May	590 OS 888.10(c)	**
Oregon	May	ORS 675.320(12)	**
Pennsylvania	May	Act 1982-140s15	**
Rhode Island	May	GLRI 5-40.1-12(a)	**
South Carolina	May	CLSC 40-36-170	**
Texas	Yes	40 TAC 379	
Tennessee*	No		
Utah	May	UCA 58-42-12	Bd. can require evidence of
Washington	May		Bd. can require evidence of
West Virginia	May	WVC 30-28-12	**
D.C.	May	DCCA 2-1705.13	**

Source: HPLIS/CSG; December 31, 1984

KEY:

* This information was taken from a November 1984 document and may not be current.
** The Board has the power to establish continuing education requirements.
a Will increase to 20 hours beginning with license renewal in 1987.

CHAPTER X

STATE REGULATION OF PHYSICAL THERAPY

PHYSICAL THERAPIST

Type of State Regulation The District of Columbia, Puerto Rico and all but two states regulate physical therapists through licensure. The other two states regulate the profession through registration. (See Table IX-1).

Scope of Practice The scope of practice of physical therapy is largely uniform throughout the United States. An example of a physical therapy scope of practice is taken from New York:

> Physical therapy is defined as;
>
> a. The evaluation, treatment or prevention of disability, injury, disease, or other condition of health using physical, chemical, and mechanical means including, but not limited to heat, cold, light, air, water, sound, electricity, massage, mobilization, and therapeutic exercise with or without assistive devices, and the performance and interpretation of tests and measurements to assess pathophysiological, pathomechanical, and developmental deficits of human systems to determine treatment, and assist in diagnosis and prognosis.
>
> b. The use of roentgen rays or radium, or the use of electricity for surgical purposes such as cauterization shall not be included in the practice of physical therapy.
>
> c. Such treatment shall be rendered pursuant to a referral which may be directive as to treatment by a licensed physician, dentist or podiatrist and in accordance with their diagnosis.

Organization of State Regulatory Bodies and Functions Physical therapists are regulated by a diverse set of structures across the states. Thirty-two jurisdictions utilize a physical therapy board or committee; three states have combined boards, for example physical therapy and occupational therapy boards; and thirteen states regulate physical therapists either by the medical board or a subcommittee. In most of the states (i.e. 37 states) physical therapists comprise a majority of the board. Public members sit on boards in 31 states. For a more detailed discussion of the makeup of the boards see Table IX-2.

The board is the primary agency in most states that issues the license and promulgates rules and regulations although in fifteen states the medical board or agency administrator does so. (See Table IX-3).

There are several organizations, either in conjunction with or independent of the board, which approve or accredit educational programs. These include the American Physical Therapy Association, and the American Medical Association. Several state laws specify only that accreditation be done by an agency recognized by the Department of Education, or the Council on Post-Secondary Education. See Table IX-3 for a breakdown on which agency is used by the individual states.

All of the regulatory bodies have the power to revoke or suspend a practitioner's license. Approximately 25% of the states boards are allowed to reprimand and probate a practitioner as well. Other sanctions available are specified in Table IX-4.

All states require a written examination prepared by the Professional Examination Service before a license can be issued. Few states require an oral or practical examination. (See Table IX-5).

Requirements for Licensure All states require that the applicant be a graduate of an accredited physical therapy educational program. Most require the applicant be of good moral character, and less than half have minimum age requirements. (See Table IX-6).

Continuing Education Requirements Five states require continuing education. Table IX-9 shows the extent of continuing education credits required as a prerequisite to license renewal.

Interstate Recognition of Credentials Nearly all jurisdictions endorse the license of an out of state practitioner once certain conditions have been met. Only four states provide for reciprocity while one jurisdiction has no provisions for reciprocity or endorsement. (See Table IX-8).

Fee Schedule Fee levels for six types of fees are shown in Table IX-7.

TABLE IX-1

PHYSICAL THERAPIST

TYPE OF STATE REGULATION

STATE	TYPE	CITATION
Alabama	Registration*	CA 34-24-10
Alaska	Licensure	AS 08.84.150
Arizona	Licensure	ARS 32-2041
Arkansas	Registration*	AS 72-1313
California	Licensure	Bus. & Prof. Code 2630
Colorado	Licensure	CRS 12-31-119
Connecticut	Licensure	CGSA Sec. 20-73
Delaware	Licensure	DCA 2605
Florida	Licensure	FS 486.028
Georgia	Licensure	OCG 43-33-11
Hawaii	Licensure	HRS 321-13
Idaho	Registration*	IC 54-2202
Illinois	Licensure	111 IRS 4202
Indiana	Licensure	IC 25-27-1-2
Iowa	Licensure	IC 148A4
Kansas	Registration	KSA 65-2913
Kentucky	Licensure	KRS 327.010.2
Louisiana	Licensure	RS 2402
Maine	Licensure	32 MRSA 3113
Maryland	Licensure	ACM 13-301
Massachusetts	Licensure	ALM 112-23A
Michigan	Licensure	ACT 368-17820
Minnesota	Registration	MSA 148.71
Mississippi	Licensure	MCA 73-23-35
Missouri	Licensure	RSMo 334.510
Montana	Licensure	MCA 37-11-301
Nebraska	Licensure	RS 71-2803
Nevada	Licensure	NRS 640.169
New Hampshire	Registration*	RSA 328-A:2
New Jersey	Licensure	NJSA 45:9-37.19
New Mexico	Licensure	NMSA 61-12-1
New York	Licensure	CLNYA 6732
North Carolina	Licensure	GSNC 90-270.35
North Dakota	Registration*	NDCC-43-26-13
Ohio	Licensure	ORCA 4755.02

STATE	TYPE	CITATION
Oklahoma	Licensure	OS 887.3:
Oregon	Licensure	ORS 688.020
Pennsylvania	Licensure	63 PS 1304
Rhode Island	Licensure	GLRI 5-40-9
South Carolina	Registration*	CLSC 40-45-100
South Dakota	Licensure	SDCL 36-10-24
Tennessee	Licensure	TCA 63-13-301
Texas	Licensure	TCSA 4512e.7
Utah	Licensure	UCA 58-24-5
Vermont	Licensure	26 VSA 2-82
Virginia	Licensure	CV 54-295.6
Washington	Licensure	RCW 18.74.090
West Virginia	Licensure	WVC 30-20-3
Wisconsin	Licensure	WSA 448.02
Wyoming	Registration*	WS 33-25-102
D.C.	Registration*	DCCA 2-1703.3
Puerto Rico	Licensure	Act, Section 2

Source: HPLIS/CSG; December 31, 1984

*Although this is designated in the state law as registration, according to this study's definition of licensure, certification and registration, it is in effect licensure.

TABLE IX-2

PHYSICAL THERAPY BOARDS

ORGANIZATIONAL PATTERN OF STATE REGULATORY BOARDS

STATE	NAME OF BOARD & DEPARTMENT	NUMBER OF BOARD MEMBERS PROF.	PUB.	OTHER	TOTAL	CITATION
Alabama	Bd. of Physical Therapy	3	0	0	3	CA 34-24-192
Alaska	State Physical Therapy Board	3	1	1[c]	5	AS 08.84.010
Arizona	Bd.of Physical Therapy Examiners	3	2	0	5	ARS 32-2002
Arkansas	St. Examining Comm. for Phy. Therapists/St. Med. Board	5	0	0	5	AS 72-1319
California	Physical Therapy Ex. Cmte. Bd. of Med. Quality Assurance	3	3	0	6	B&P Code 260
Colorado	State Board of Physical Therapy	3	2	0	5	CRS 12-41-10
Connecticut	Bd. of Examiners for Phys. Therapists Dept. of Health Services	2	2	1[c]	5	CGS 20-67
Delaware	St. Exam. Bd. of Physical Therapy	3	1	1[d]	5	DCA 2603
Florida	Physical Therapy Council Bd. of Medical Examiners	3	0	0	3	FS 486.025
Georgia	State Board of Physical Therapy	5	1	0	6	OCG 43-33-6
Hawaii	Dept. of Health	-	-	-	-	---------
Idaho	Physical Therapy Advisory Committee State Bd. of Medicine	3	0	0	3	IC 54-2209
Illinois	Physical Therapy Examining Committee Dept. of Registration & Education	5	0	0	5	111 IRS 4206
Indiana	St. Exam. Cmte. for Phy. Therapists St. Bd. of Med. Regis. & Examination	3	0	1[e]	4	IC 25-27-1-4
Iowa	Bd. of Phys. & Occ. Therapy Examiners Dept. of Health	3	2	2	7	ICA
Kansas	St.Examining Cmte. for Phys. Therapy State Bd. of Healing Arts	3	0	2[f]	5	KSA 65-2903
Kentucky	St. Board of Physical Therapy	3	1	1	5	KRS 327.030
Louisiana	St. Bd. of Medical Examiners Dept. of Health & Human Resources	0	0	7[b]	7	RS 37:1263

STATE	NAME OF BOARD & DEPARTMENT	NUMBER OF BOARD MEMBERS				CITATION
		PROF.	PUB.	OTHER	TOTAL	
Maine	Bd. of Examiners in Physical Therapy	2	1	2[c,d]	5	32 MRSA 3112
Maryland	St. Bd. of Physical Therapy Examiners	5	1	0	6	ACM 13-202
Massachusetts	Bd. in Allied Health Professions					
Michigan	St. Bd. of Physical Therapy Dept. of Licensure & Regulation	5	2	0	7	PH Code 17821
Minnesota	Physical Therapy Council St. Bd. of Medical Examiners	3	1	3[a]*	7	MS 148.67
Mississippi	Mississippi Physical Therapy Board	3	1	2[c]	6	MCA 73-23-41
Missouri	St. Bd. for Registration of the Healing Arts/Dept. of Consumer Affairs, Regulation & Licensing	0	1	7[a]	8	RSMo 334.120
Montana	Bd. of Physical Therapy Examiners Dept. of Commerce	3	0	0	3	MCA 2-15-1858
Nebraska	Bd. of Examiners in Phys. Therapy Dept. of Health	3	1	0	4	
Nevada	St. Bd. of Physical Therapy Examiners	4	1	0	5	NRS 640.030
New Hampshire	Bd. of Registration in Medicine	2	0	2[c,d]	4	RSA 328-A:16
New Jersey	St. Bd. of Physical Therapy Dept. of Law & Public Safety	6	2	3[g]	11	NJSA 45:9-3715
New Mexico	Physical Therapists' Licensing Bd.	4	1	0	5	NMSA 61-12-1
New York	St. Bd. for Physical Therapy St. Education Department	8	1	0	9	CLNY 6733
North Carolina	Bd. of Physical Therapy Examiners	4	1	3[h]	8	GSNC 90-270.25
North Dakota	St. Exam. Cmte. for Phy. Therapists	3	1	2[c]	6	NDCC 43-26-04
Ohio	Physical Therapy Section Occ. Therapy and Phys. Therapy Bd.	3 3	1 2	1[i] 5	5 10	ORCA 4755.03 ORCA 4755.03
Oklahoma	Physical Therapy Cmte. St. Bd. of Medical Examiners	3	0	0	3	OS 8874
Oregon	Physical Therapist Licensing Board	5	0	1[j]	6	ORS 688.160
Pennsylvania	St. Bd. of Phys. Therapy Examiners					63 PS 1302
Rhode Island	Board of Physical Therapy Dept. of Health	3	1	1[c]	5	GLRI 5-40-3

STATE	NAME OF BOARD & DEPARTMENT	PROF.	PUB.	OTHER	TOTAL	CITATION
South Carolina	St. Bd. of Phys. Therapy Examiners	3	1	1[d]	5	CLSC 40-45-30
South Dakota	Physical Therapy Subcommittee	3	0	0	3	
	SD State Bd. of Medical and Osteopathic Examiners	4	1	0	6	
Tennessee	St.Bd. of Occ. & Phys.Ther.Examiners	3	1	3[k]	7	TCA 63-13-103
Texas	Bd. of Physical Therapy Examiners	6	3	0	9	TCSA 4512e.2
Utah	Rep. Comm. for Physical Therapists Dept. of Business Regulation	3	0	0	3	UCA 58-24-4
Vermont	"The Appeals Panel" Office of the Secretary of State	2	0	0	2	26 VSA 2092
Virginia	Advisory Committee on Physical Therapy VA State Board of Medicine	5	0	0	5	VC 54-295.2
Washington	State Board of Physical Therapy Dept. of Licensing	4	1	0	5	RCW 18.74.020
West Virginia	Bd. of Physical Therapy	5	0	0	5	WVC 30-20-4
Wisconsin	Phy. Therapists Ex. Council Med. Examining Board Dept. of Registration & Licensing	3	0	0	3	WSA 15-407
Wyoming	Bd. of Physical Therapy	2	0	1[c]	3	WS 33-25-103
D.C.	Phy. Therapists' Examining Bd. Dept. of Consumer & Reg. Affairs					
Puerto Rico	Board of Physical Therapy	4	1	0	5	T. 20, s.260

Source: HPLIS/CSG; December 31, 1984

Key:

a. Licensed and registered physicians and surgeons.
b. Graduate physicians or surgeons and practitioners.
c. Physician licensed to practice in this state.
d. Physical therapist assistant.
e. Licensed physician who is, if possible, a physiologist.
f. Physician licensed to practice medicine and surgery; and the secretary of the state board of healing arts.
g. A state executive department member; a hospital administrator; and a physician licensed to practice medicine and surgery.
h. One medical doctor and two physical therapy assistants.
i. Physician licensed to practice medicine and surgery in this state.
j. An orthopedic surgeon who serves without the right to vote.
k. Occupational therapists.

TABLE IX-3

PHYSICAL THERAPIST

FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	ISSUE LICENSE	APPROVE/ACCREDIT EDUCATIONAL PROGRAM	PROMULGATE REGULATIONS
Alabama	Board	Board	Board
Alaska	Department	APTA or AMA	Department
Arizona	Board	Board/APTA	Board
Arkansas	Board	APTA	Committee/Board
California	Committee/Board	Committee	Committee/Board
Colorado	Board	Board/APTA	Board
Connecticut	Department Director	Board	Department Director
Delaware	Board	USE/CPSE	Board
Florida	Board	Board/USE/CPSE	Board
Georgia	Board	Board	Board
Hawaii	Department	USE/CPSA	Department
Idaho	Board	Board/USE/CPSE	Medical Board
Illinois	Department	Department	Department
Indiana	Board	Board	Committee/Board
Iowa	Board	Board/USE/CPSE	Board
Kansas	Medical Board	Board	Medical Board
Kentucky	Board	Board	Board
Louisiana	Board	Board	
Maine	Board	Board/USE/CPSE	Board
Maryland	Board	APTA or AMA	Board
Massachusetts	Board	Board	Board
Michigan	Board	APTA	Board
Minnesota	Board/Council	Board/AMA or APTA	Board
Mississippi	Board	USE/CPSE	Board
Missouri	Board	AMA or APTA	Board
Montana	Board	Board	Board
Nebraska	Board/Department	Board/Department	Board/Department
Nevada	Board	Board	Board
New Hampshire	Board	Board	Board/Committee
New Jersey	Board	USE/CPSE	Board
New Mexico	Board	Board	Board
New York	Department	Department	Department
North Carolina	Board	USE/CPSE	Board
North Dakota	Committee	Committee	Committee
Ohio	Board	Board/APTA	Board

STATE	ISSUE LICENSE	APPROVE/ACCREDIT EDUCATIONAL PROGRAM	PROMULGATE REGULATIONS
Oklahoma	Board/Committee	Board	Board
Oregon	Board	Board	Board
Pennsylvania	Board	Board/APTA	Board
Rhode Island	Department Dir.	Board	Department Director
South Carolina	Board	Board	Board
South Dakota	Medical Board	Board	Medical Board
Tennessee	Board	Board	Medical Board
Texas	Board	Board	Board
Utah	Department + Board	Department + Board	Board
Vermont	Secretary of State	USE/CPSE	Secretary of State
Virginia	Board	AMA/APTA	Board
Washington	Department Director	Board	Board
West Virginia	Board	APTA + Board	Board
Wisconsin	Board	Board	Board
Wyoming	Board	Board	Board
D.C.	Mayor	ATPA/Mayor	Council
Puerto Rico	Board	AMA/APTA	Board

Source: HPLIS/CSG; December 31, 1984

KEY:

APTA	American Physical Therapy Association accredits schools
AMA	American Medical Association accredits schools through its Council of Medical Education
USE/CPSA	Accreditation may be done by any agency recognized by the United States Department of Education or the Council on Postsecondary Education

TABLE IX-4

PHYSICAL THERAPIST

ENFORCEMENT FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	CITATION	SUSP.	REVOKE	RESTR. LIC.	CENSURE	REPRI.	PROB.	FINE	OTHER
Alabama	CA 34-24-217	x	x						
Alaska	AS 08.84.120	x	x						
Arizona	ARS 32-2042	x	x	x	x		x	x	a
Arkansas	AS 72-1328	x	x						
California	CBPC 2660	x	x				x		
Colorado	CRS 12-41-118	x	x	x	x	x	x	x	a
Connecticut	CGS 20-73a	x	x						
Delaware	DCA 2616	x	x						
Florida	FS 486.125	x	x			x	x	x	
Georgia	OCG 43-33-18	x	x	x	x	x	x		b
Hawaii	HAR 11-3-7	x	x				x		a
Idaho	IC 54-2213	x	x						
Illinois	111 IRS 4217.1	x	x		x	x	x		
Indiana	IC 25-27-1-10-1	x	x		x	x	x		a,e
Iowa	IAC 470-138.112	x	x					x	
Kansas	KSA 65-2912	x	x				x		
Kentucky	KRS 327.070	x	x						
Louisiana	RS 2413	x	x						
Maine	32 MRSA 3117A	x	x						
Maryland	ACM 13-315	x	x			x	x		
Massachusetts	ALM 112-23K	x	x		x	x	x		f
Michigan	PHC 17831	x	x	x		x	x	x	
Minnesota	MSA 148.75	x	x						
Mississippi	MCA 73-23-59	x	x						
Missouri	RSMo 334.100	x	x	x		x			
Montana	MCA 37-1-136	x	x		x	x	x		
Nebraska		x	x	x	x	x	x		
Nevada	NRS 640.160	x	x				x	x	
New Hampshire	RSA 328-A:9	x	x						
New Jersey	NJSA 45.9-37.18	x	x						
New Mexico	NMSA 61-12-12	x	x						
New York									
North Carolina	Bd. Rule 16,17	x	x				x	x	c
North Dakota	NDCC 43-26-11	x	x						
Ohio	ORCA 4755.10	x	x						

STATE	CITATION	SUSP.	REVOKE	RESTR. LIC.	CENSURE	REPRI.	PROB.	FINE	OTHER
Oklahoma	OS 887.13:	x	x						
Oregon	ORS 688.140	x	x						
Pennsylvania	63 PS 1311	x	x						
Rhode Island	GLRI 5-40-13	x	x						
South Carolina	CLSC 40-45-200	x	x						
South Dakota	SDCL 36-10-43	x	x						
Tennessee	TCA 63-13-307	x	x						d
Texas	TCSA 4512e.19	x	x						
Utah	UCA 58-24-13	x	x						
Vermont	26 VSA 2121	x	x						
Virginia	VC 54-316	x	x		x	x	x		
Washington	RCW 18.74.080	x	x	x					
West Virginia	WVC 30-20-10	x	x						
Wisconsin	WSA 448.02	x	x		x				
Wyoming	WC 33-25-111	x	x						
D.C.	DCCA 2-1703.11	x	x						
Puerto Rico	Act, s. 12	x	x						

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Board may order licensee to submit to corrective education in areas of deficiency.
b. Board may require licensee to submit to professional counseling as a condition of avoiding discipline.
c. Warning to licensee
d. Cancellation of license
e. Board may limit areas of practice
f. Board may otherwise discipline

TABLE IX-5

PHYSICAL THERAPIST

EXAMINATION OF APPLICANTS

STATE	WRITTEN EXAM USED	ORAL	PRACTICAL	CITATION
Alabama	x			CA 34-24-212
Alaska	x			12 AAC 54.060
Arizona	x			R4-24-201
Arkansas	x			ASA 72-1322
California	x			Bus.& Prof. Code 2605
Colorado	x			CRS 12-41-112
Connecticut	x			CGS 20-70
Delaware	x			DCA 2608
Florida	x			FS 486.051
Georgia	x			Rules 490-2-.02
Hawaii	x			Rules, 11-3-4
Idaho	x			Rules, 5.2.3
Illinois	x			111 IRS 4211
Indiana	x			IC 25-27-1-7
Iowa	x		yes	IC 470-137.3
Kansas	x			KAR 100-35-7
Kentucky	x			KRS 327.050
Louisiana	x	may		
Maine	x			Rules, 02-393-6
Maryland	x[a]			Regs, 10.38.03
Massachusetts	x	may	may	ALM 112-23I
Michigan	x[a]			Regs, R338.7107
Minnesota	x			MSA 148.72.3
Mississippi	x		yes	MCA 73-23-47
Missouri	x			RSMo 334.530
Montana	x[a]			Rules 8.42.402
Nebraska	x			RSN 71-2803
Nevada	x			Rules 640.040
New Hampshire	x			RSA 328-A:5
New Jersey	x			NJSA 45:9-37.25
New Mexico	x			NMSA 61-12-11
New York	x	yes	yes	R 77-2
North Carolina	x			Board Rules, VI
North Dakota	x			NDCC 43-26-06
Ohio	x			Rules, 4755-23-03

STATE	WRITTEN EXAM USED	ORAL	PRACTICAL	CITATION
Oklahoma	x			OS 887.6
Oregon	x			Rules, 10-015
Pennsylvania	x		yes	Rules, 49 PC 40.13
Rhode Island	x			Rules, 5.1.1
South Carolina	x			Rules, 101-7
South Dakota	x			SDCL 36-10-28
Tennessee	x			Rules, 1150-1-.04
Texas	x	may	may	Rule II
Utah	x			Rules, I-C
Vermont	x			Rules, 2.3(3)
Virginia	x			Rules VI(1)
Washington	x			WAC 308-42-045
West Virginia	x			WVC 30-20-7
Wisconsin	x			MED 7.04
Wyoming	x			R3.1
D.C.	x			DCCA 2-1703.8
Puerto Rico	x		yes	T.20 sec. 246

Source: HPLIS/CSG; December 31, 1984

KEY:

x. All of the states use the objective examination prepared and graded by the Professional Examination Service.

a. Applicants are required to pass a jurisprudence examination on state laws and regulations governing physical therapists.

TABLE IX-6

PHYSICAL THERAPIST

INITIAL REQUIREMENTS FOR LICENSE APPLICANTS

STATE	CITATION	EDUCATION	MORALS	AGE	CITIZENSHIP
Alabama	CA 34-24-211	x	a		
Alaska	AS 08.84.030	x			
Arizona	ARS 32-2022	x	a		
Arkansas	AS 72-1322	x	a	21	j
California	B&P Code 2635	x	c	18	
Colorado	CRS 12-41-111	x	a		
Connecticut	CGS 20-70	x			
Delaware	DCA 2606	x	e		
Florida	FS 486.031	x	a	18	
Georgia	OCG 43-33-12	x	c,f		
Hawaii	HRS 11-3-4	x			
Idaho	IC 54-2205	x	a		
Illinois	111 IRS-4207	x	a	18	
Indiana	IC 25-27-1-6	x	f		
Iowa	IC 148A.4	x			
Kansas	KSA 65-2906	x		18	
Kentucky	KRS 327.050	x			
Louisiana	RSA 2403	x	a	21	yes
Maine	32 MRSA 3114A	x	b		
Maryland	ACM 13-302	x	a		
Massachusetts	ALM 112-23I	x			
Michigan	Pub. H. C.	x	a	18	
Minnesota	MSA 148.705	x			
Mississippi	MCA 72-23-47	x	a		
Missouri	RSMo 334.530	x	a	21	
Montana	MCA 37-11-303	x	a	18	
Nebraska	RS 71-2803	x			
Nevada	NRS 640.080	x	a		
New Hampshire	RSA 328-A:3	x	h	18	
New Jersey	NJSA5:9-37.22	x			
New Mexico	NMSA 61-12-10	x	a	21	
New York	CLNYA 6734	x	a	18	
North Carolina	GSNC90-270.29	x	a		
North Dakota	NDCC 43-26-06	x	a	18	
Ohio	ORCA 4755-06	x	a	18	

STATE	CITATION	EDUCATION	MORALS	AGE	CITIZENSHIP
Oklahoma	OS 887.6	x	a		
Oregon	ORS 688.050	x	a	18	
Pennsylvania	PL 63-1306	x	a	20	
Rhode Island	GLRI 5-40-6	x	a	18	
South Carolina	CLSC40-45-100	x			
South Dakota	SDCL 36-10-27	x	a		
Tennessee	TCA 63-13-303	x	a		
Texas	TCSA 4512E.8	x			
Utah	UCA 58-24-6	i	a	21	
Vermont	26 VSA 2101	x			
Virginia	VC 54-308.5	x	a	18	
Washington	RCW 18.74.030	x	a		
West Virginia	WVC 30-20-6	x	a	18	
Wisconsin	WSA 448.05.4	x			
Wyoming	WS 33-25-105	x	a,g		
D.C.	DCCA2-1703.8	x	a,d	20	
Puerto Rico	T.20-245	x	a		

Source: HPLIS/CSG; December 31, 1984

KEY:

x. Successful completion of an accredited Physical Therapy educational program approved by the Board.
a. Applicant must be of "good moral character."
b. Applicant must demonstrate that he or she is trustworthy.
c. Not be addicted to the intemperate use of alcohol or narcotic drugs or other controlled substances.
d. Be in good physical and mental health, as certified by a physician licensed to practice in D.C.
e. Applicant must submit evidence of suitability to practice.
f. Each applicant must present satisfactory evidence that he or she does not have a conviction for an act which would constitute a ground for disciplinary sanction under this chapter or a felony that has a direct bearing on applicants ability to practice competently.
g. Applicant must submit two letters of recommendations from persons who have known applicant for a period of two years. Board may also require a personal interview.
h. Must display professional behavior.
i. Applicant must either be a graduate of a school of physical therapy or a graduate of a school of physical education or a school of nursing after having completed a course in physical therapy.
j. Must be a U.S. citizen or have made a declaration of intention to become a citizen. If applicant does not follow through with intention within a seven year period, the license is automatically revoked.

TABLE IX-7

PHYSICAL THERAPY

SCHEDULE OF FEES

STATE	APPLICATION	EXAM	RENEWAL	TEMPORARY	DUPLICATE	RECIPROCAL
Alabama	$100*	Cost	$100/An	$100*	$10	
Alaska	$50	$50	$200/4 yrs	$20/8 mo		$50
Arizona	$300*a	$150*	$300*/Bi		$50*	
Arkansas			$3/An			
California		$50*			$2	$5
Colorado						
Connecticut**		$30	$5/An			$50
Delaware	$100		Biennial			
Florida	$110					
Georgia**	$50	$50	$35/Bi			$50
Hawaii	$35	Cost	$5/An			$35
Idaho**	$80*	$40*	$70*/An	$70*		
Illinois**		$35	$15/Bi			$35
Indiana	$50*	Cost	$20/Bi			$50
Iowa	$55	$85	$55/Bi		$10	$55
Kansas**		$100*				$100*
Kentucky	$250*		$100/Bi			$100
Louisiana		$50	$25/An	$10		
Maine	$30	$70	$40/Bi		$5	$30
Maryland**	$25	$35	$10/An			$25
Massachusetts**		$50				
Michigan	$60	$50a	$40/Bi	$35		$35
Minnesota						
Mississippi**		$200*	$50*/An			$200*
Missouri	$50a	$150	$100/An		$15	$200
Montana	$150		$75/An	$30/Thru Exam		
Nebraska	$50		$10/An			$50
Nevada		$75				
New Hampshire	$25*		$25*/An			$40
New Jersey**		$100	$20/Bi			$100
New Mexico	$100*	Cost	$30/An			
New York	$100		$60/Bi			$65
North Carolina	$65		$20/An		$5	$75
North Dakota	$35	$75*	$10/An			
Ohio	$100		$60/Bi		$15	$75

STATE	APPLICATION	EXAM	RENEWAL	TEMPORARY	DUPLICATE	RECIPROCAL
Oklahoma	$35		$5/An	$15		$35
Oregon		Cost	$30/An			$60
Pennsylvania	$50		$10/Bi	$25/1 yr.		$75
Rhode Island	$75		$30/An			$75
South Carolina	$120		$18/An		$3	$70
South Dakota	$40		$10/An			$40
Tennessee	$35	$75	$20/An	$15/3 Mos.		$100
Texas	$40	$75	$40/An	$30	$25	$60
Utah	$40		$20/Bi		$5	$25
Vermont						
Virginia		$100				$100
Washington	$100		$35/An		$5	$100
West Virginia	$60		$20/An	$20		
Wisconsin	$50		$35/Bi		$5	$50
Wyoming	$50*	Cost	$50*/An	$50*		
D.C.**	$20	$50	$50/An			$70
Puerto Rico	$25		$5/Bi	$10		

Source: HPLIS/CSG; December 31, 1984

KEY:

a Licensure fee
* Not exceeding
** This information was taken from a December 1982 document and may not be current.

TABLE IX-8

PHYSICAL THERAPIST

RECIPROCITY AND ENDORSEMENT

STATE	TYPE	CONDITIONS	CITATION
Alabama	Endorsement	a	CA 34-24-214
Alaska	Endorsement	a	AS 08.84.060
Arizona	Endorsement	a + b	ARS 32-2023
Arkansas	Reciprocity	a + c	AS 72-1305
California	Endorsement	a	B&P Code 2636.5
Colorado	Endorsement	a + b	CRS 12-41-114
Connecticut	Reciprocity	a + c	CGS 20-71
Delaware	Endorsement	a	DCA 2610
Florida	Endorsement	a	FS 486.081
Georgia	Endorsement	a	OCG 43-33-15
Hawaii	Endorsement	d	HRS 11-3-4
Idaho	Endorsement	none	IC 54-2206
Illinois	Endorsement	a	111 IRS 4211
Indiana	Endorsement	a	IC 25-27-1-9a
Iowa	Endorsement	e + f	IC 470-137.4(5)
Kansas	Endorsement	a	KSA 65-2909
Kentucky	Endorsement	a	KRS 327.060
Louisiana	Endorsement	a	RS 2403.7
Maine	Endorsement	a	32 MRSA 3114-A(1)(C)
Maryland	Endorsement	a	ACM 13-307
Massachusetts	Endorsement	k	259 CMR 5.03:2
Michigan	Endorsement	a	Public Health Code
Minnesota	Endorsement	a	MSA 148.72.1
Mississippi	Endorsement	a	MCA 73-23-51
Missouri	Endorsement (i)	a	RSMo 334.540
Montana	Endorsement	a + g	MCA 37-11-307
Nebraska	Endorsement	if PES taken in last 12 months	
Nevada	Endorsement	a	NRS 640.140
New Hampshire	Endorsement	a	RSA 328-A:4
New Jersey	Endorsement	a	NJSA 45:9-37.28
New Mexico			
New York			
North Carolina	Endorsement	a	GSNC 90-270.31
North Dakota	Endorsement	a	NDCC 43-26-08
Ohio	Endorsement	a	ORCA 4755.44
Oklahoma	Endorsement	a	OS 887.9:
Oregon	Endorsement	a	ORS 688.080
Pennsylvania	Endorsement	a + h	63 PS 1306
Rhode Island	Endorsement	a	GLRI 5-40-7(b)
South Carolina	Endorsement	a	CLSC 40-45-120

STATE	TYPE	CONDITIONS	CITATION
South Dakota	Endorsement	a	SDCL 36-10-31
Tennessee	Endorsement	a	TCA 63-13-305
Texas	Endorsement	a	TCSA 4512e.10
Utah	Endorsement	a + b	Board Rules, II-D
Vermont	Endorsement	a	26 VSA 2104
Virginia	Endorsement	a	Bd. Rules, VIII(1)
Washington	Endorsement	a	RCW 18.74.0680
West Virginia	Endorsement	a	WVC 30-20-6d
Wisconsin	Endorsement	a	R 7.04
Wyoming	Reciprocity	c	R 4.3
	Endorsement	j	R 4.4
D.C.	Reciprocity	a + b	DCCA 2-1703.9
Puerto Rico	Not Provided For		T.20, s.241 et seq.

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Board may waive examination for any person who holds an active license issued by a state having licensing requirements substantially similar to those of the home state (and/or if applicant passed national examination in other state and made a score acceptable for licensure in the home state)

b. Applicants who have practiced less than five years in other states "shall successfully demonstrate to the board competency in the practice of physical therapy or shall serve an internship or take remedial courses as determined by the board or both."

c. License will be issued only if applicant's state "accords a similar privilege of registration or licensure without examination to a holder of a license as a physical therapist in this state."

d. As long as applicant previously took Professional Examination Service exam for physical therapists in another state, applicant only has to show that he/she made a passing score on the exam.

e. All applicants must pass an oral or practical examination prepared by the board, in lieu of the national exam.

f. Applicant "shall have practiced physical therapy on a full-time or full-time equivalent basis or served as a full-time faculty member teaching physical therapy in a school of physical therapy for at least one of the immediately preceding three years or shall have graduated from an approved school of physical therapy within a period of one year from the date of graduation to the time the application is completed for licensure."

g. The board may, in its discretion, require a written, oral or practical examination and may require continued study or refresher courses for applicant.

h. If the applicant has previously failed a licensing examination, reciprocal license will be granted only in the discretion of the board.

i. The board is authorized to negotiate reciprocal compacts with licensing boards of other states.

j. Applicant must have passed the Professional Examination Service Exam with a standard deviation of no more than 2.0 below the national average; or passed the American Registry of Physical Therapists test; or passed an equivalent qualifying test approved by the board.

k. Hold a current license from a state or territory of the U.S., District of Columbia or the Commonwealth of Puerto Rico. Must have achieved a passing grade set by the board on each section of the PES exam; and sign a statement of intent that if applicant had not previously practiced under supervision for at least one year, that the applicant will do so after being granted a license.

TABLE IX-9

PHYSICAL THERAPIST

CONTINUING EDUCATION REQUIREMENTS

STATE	REQUIRED	CITATION	EXTENT OF EDUCATION
Alabama	No		
Alaska	No		
Arizona	No		
Arkansas	N/A		
California	N/A		
Colorado	No		
Connecticut	No		
Delaware	Yes	Rule 3.2	30 Hours Biennially
Florida	No		
Georgia	No		
Hawaii	No		
Idaho	No		
Illinois	No		
Indiana	No		
Iowa	Yes	Regs,470-138.2	40 hours every 2 yrs.
Kansas	Yes	KAR 100-47-1	60 hours every 2 yrs.
Kentucky	No		
Louisiana	No		
Maine	No		
Maryland	No		
Massachusetts	May	ALM 112-23B	Bd. has power to establish
Michigan	No		
Minnesota	No		
Mississippi	No		
Missouri	No		
Montana	Yes	Regs,8.42.165	"Continued Participation"
Nebraska			
Nevada	Yes	NRS 640.150(3)	20 hrs./year (at most)
New Hampshire	No		
New Jersey	No		
New Mexico	Yes	Rule 83-8	10 hrs./year
New York	No		
North Carolina	No		
North Dakota	May	R61.1-03-01-01	Committee may establish
Ohio	No		

STATE	REQUIRED	CITATION	EXTENT OF EDUCATION
Oklahoma	No		
Oregon	No		
Pennsylvania	No		
Rhode Island	No		
South Carolina	No		
South Dakota	No		
Tennessee	No		
Texas	No		
Utah	No		
Vermont	No		
Virginia	No		
Washington	No		
West Virginia	No		
Wisconsin	No		
Wyoming	No		
D.C.	N/A		
Puerto Rico	No		

Source: HPLIS/CSG; December 31, 1984

KEY:

N/A means not available

CHAPTER XI

STATE REGULATION OF PODIATRIC MEDICINE

PODIATRIST

Type of State Regulation The Fifty states, the District of Columbia and Puerto Rico regulate podiatrists through licensure. (See Table X-1).

Scope of Practice The scope of practice for podiatry is largely uniform across the United States.

South Dakota provides a clear and concise example:

> Scope of practice defined-Prohibited acts. Podiatry is hereby defined as the medical, mechanical, and surgical treatment of the human foot. A podiatrist shall not be authorized to amputate the human foot, a toe or toes, or remove all of any bone other than those bones in the toes; or perform any surgery on the human body at or above the ankle, or administer anesthetics other than local anesthetics.

There are some variances from state to state: (1) Two states allow podiatrists to treat the human hand for superficial disorders which are common to the foot, and (2) two states expressly allow for amputation of the toe; however, no states allow for the amputation of the foot in *toto*. None of the states allow the podiatrist to administer other than local anesthesia, although three states allow the podiatrist to give treatment which involves the use of general anesthetics if the treatment is rendered in a hospital approved by the state, and if the anesthesia is administered by the proper party.

Several states have older legislation which refers to the practice of podiatry as 'chiropody'. For purposes of this survey podiatry and chiropody are synomynous.

Organization of State Regulatory Bodies and Functions Most of the states utilize a board or committee predominately composed of podiatrists to regulate the profession. Ten states regulate podiatry through the medical board and all of these boards have a majority of physician members. Three boards have no podiatry members. Thirty-four states also have public members on the board. (See Table X-2).

The board is the primary body responsible for issuing license and promulgating rules and regulations for podiatrists in most of the states. Most state statutes give the board the power to approve or accredit educational programs. All six podiatry schools in the United States have been accredited by the American Podiatry Association (APA). Sixteen states name the APA in the statutes while three states recognize colleges approved by the APA. (See Table X-3).

All of the states have given the boards the power to discipline the podiatrists by suspension or revocation of their license. Many allow for probation, reprimand and license restrictions as sanctions available to the board. (See Table X-4). Two state boards can require additional education or training courses, and one state can require public service hours to be rendered by the licensee.

All states require the applicants to take a written examination for licensure. Forty-three states use the National Board of Podiatry Examiners' examination; the remaininng states use an exam developed or approved by the individual board. Almost half of the states require a practical examination as well as the written exam. Sixteen states require, and nine states may require an oral exam. (See Table

X-5). Currently the Federation of Podiatry Boards is preparing an examination which will test practical skills.

Requirements for Licensure All jurisdictions require the applicant to be a graduate of a board or APA approved school of podiatry. Most states require that the applicant be of good moral character, and a majority also have age requirements, generally either 18 or 21 years. (See Table X-6).

Continuing Education Requirements Thirty-two states require that continuing education requirements be met as a condition of license renewal. See Table X-9 for the extent of the required education.

Interstate Recognition of Credentials The states are almost evenly split between those that allow podiatrists licensed in one state to practice in another state through reciprocity, (22 states) and those that do so through endorsement (24 states). See Table X-8 for the conditions individuals must meet before they can practice.

Fee Schedule Fee levels for six types of fees are shown in Table X-7.

TABLE X-1

PODIATRIST
TYPE OF STATE REGULATION

STATE	TYPE	CITATION
Alabama	Licensure	Title 46 Section 297
Alaska	Licensure	AS 308.64.170
Arizona	Licensure	A.R.S. 32-851
Arkansas	Licensure	ASA 72-309
California	Certification*	CB & PC-2472
Colorado	Licensure	CRS 12-32-102
Connecticut	Licensure	CGS 20-65
Delaware	Licensure	DCA 24 502
Florida	Licensure	FS.461.012
Georgia	Licensure	OCGA43-35-13
Hawaii	Licensure	HRS 463E-2
Idaho	Licensure	IC 54-603
Illinois	Licensure	111 IRS 4901
Indiana	Licensure	IC 25-29-1-2
Iowa	Licensure	IC 147.86
Kansas	Licensure	KSA 65-2002
Kentucky	Licensure	KRS 311.400
Louisiana	Licensure	RS 37:612
Maine	Licensure	32 MRSA-3552
Maryland	Licensure	ACM 15-301
Massachusetts	Registration*	ALM 112 13
Michigan	Licensure	MI Ad. Code R.338.8103
Minnesota	Licensure	MSA 153.15
Mississippi	Licensure	MCA 73-27-15
Missouri	Licensure	RSMo 330.020
Montana	Licensure	MCA 36-6-301
Nebraska	Licensure	RS 71-174.01
Nevada	Licensure	NRS 635.070
New Hampshire	Licensure	RSA 315:8
New Jersey	Licensure	NJSA 45:5-11
New Mexico	Licensure	NMSA 61-8-3
New York	Licensure	CLNYA 7001
North Carolina	Licensure	NCS 90.202.3
North Dakota	Licensure	NDCC 43-05-09
Ohio	Certification*	ORCA 4731.60

STATE	TYPE	CITATION
Oklahoma	Licensure	59 OS 4.143
Oregon	Licensure	ORS 677.810
Pennsylvania	Licensure	63 PS 42.12
Rhode Island	Licensure	GLRI 5-29-1
South Carolina	Licensure	CLSC 40-51-65
South Dakota	Licensure	SDCL 36-8-5
Tennessee	Licensure	TCA 63-3107
Texas	Licensure	Podiatry Act 45676
Utah	Licensure	UCA 58-5-1
Vermont	Registration*	VSA 361
Virginia	Licensure	VC 54.274
Washington	Licensure	RCW 18.22.020
West Virginia	Licensure	WVC 30-3-13
Wisconsin	Licensure	WSA 448.03(1)
Wyoming	Licensure	WS 33-133.3
D.C.	Licensure	DCCA 2-2217
Puerto Rico	Licensure	Act 170-13

Source: HPLIS/CSG; December 31, 1984

KEY:

* Although this is designated in the state law as certification, according to this study's definition of licensure, certification and registration, it is in effect licensure.

TABLE X-2

PODIATRIST
ORGANIZATIONAL PATTERN OF STATE REGULATORY BOARDS

STATE	NAME OF BOARD & DEPARTMENT	NUMBER OF BOARD MEMBERS				CITATION
		PROF.	PUB.	OTHER	TOTAL	
Alabama	State Bd.of Podiatry	7	0	0	7	CA34-24-250
Alaska	State Medical Bd. Dept. of Commerce and Economic Dev.	0*	2	5	7	AS 08.64.010
Arizona	State Bd. of Podiatry Examiners	3	2	0	5	ARS 32-802
Arkansas	State Podiatry Examining Bd.	3	0	0	3	AS 72-302
California	Podiatry Examining Committee Dept. of Consumer Affairs	4*	2	0	6	C.B.P.C. 2462
Colorado	Podiatry Board	5	0	0	5	CRS 12-32-103
Connecticut	Bd. of Examiners in Podiatry Dept. of Health	3	2	0	5	20-51
Delaware	Bd. of Podiatry	3	2	0	5	Section 503
Florida	Bd. of Podiatry Dept. of Professional Regulation	5	2	0	7	21T-10.02
Georgia	State Bd. of Podiatry Examiners	3	1	0	4	43-35-2
Hawaii	Bd. of Medical Examiners Dept. of Regulatory Agencies	0	2	7	9	HRS 453-5
Idaho	State Bd. of Podiatry Bureau of Occupational Licensing	4	1	0	5	54-604
Illinois	Examining Committee (Podiatry) Dept. of Registration & Education	5	0	0	5	111 IRS 4903(5)

		NUMBER OF BOARD MEMBERS				
STATE	NAME OF BOARD & DEPARTMENT	PROF.	PUB.	OTHER	TOTAL	CITATION
Indiana	Committee of Podiatry Examiners	4	0	1[b]	5	IC 25-29-1-3
Iowa	Board of Podiatry Examiners Dept. of Health	3	2	0	5	
Kansas	Advisory Committee on Podiatry State Board of Healing Arts	3	0	0	3	K.S.A. 74-2807
Kentucky	State Bd. of Podiatry	4	1	0	5	KRS 311.410
Louisiana	St. Bd. of Medical Examiners	2[f]	0	7[b]	9	RS37:612;1263
Maine	Examiners of Podiatrists Board of Registration in Medicine	2	1	2[b]	5	32 MRSA 51.3601
Maryland	State Bd. of Podiatry Examiners Dept. of Health & Mental Hygiene	5	1	0	6	15-202
Massachusetts	Bd. of Podiatry	3	1	1	5	
Michigan	Bd. of Podiatric Medicine and Surgery Dept. of Licensing and Regulation	3	2	0	5	R 333.18021
Minnesota	Bd. of Podiatry	5	2	0	7	MSA 153.02
Mississippi	Bd. of Medical Licensure	0	0	9 MDs	9	
Missouri	State Bd. of Podiatry Dept. of Consumer Affairs	4	1	0	5	RSMo 330.110
Montana	Board of Medical Examiners Dept. of Commerce	1	2	6	9	MSA 2-15-1841
Nebraska	Bd. of Examiners in Podiatry Dept. of Health	4	1	0	5	RS 71-113(1)
Nevada	Bd. of Podiatry	4	1	0	5	NRS635.020

STATE	NAME OF BOARD & DEPARTMENT	NUMBER OF BOARD MEMBERS PROF.	PUB.	OTHER	TOTAL	CITATION
New Hampshire	Bd. of Registration in Podiatry	4	1	0	5	RSA 315:1
New Jersey	Bd. of Medical Examiners	1	1	13[g]	15	NJSA 45:9-1
New Mexico	Bd. of Podiatry	3	1	0	4	NMSA
New York	Bd. of Podiatry Dept. of Health	7	0	0	7	CLNYA 7003
North Carolina	Bd. of Podiatry Examiners	3	1	0	4	GSNC90-202.4
North Dakota	Bd. of Registry in Podiatry	3	0	1[b]	4	NDCC 43-05-03
Ohio	State Medical Board	1	2	8[c]	11	ORCA 34731.01
Oklahoma	Bd. of Chiropody	3	0	0	3	59OS4.137
Oregon	Advisory Council on Podiatry Bd. of Medical Examiners	3	1	1[a]	5	ORS 677.855
Pennsylvania	State Bd. of Podiatry Examiners Dept. of State	4	2	2	8	71P.S.-174
Rhode Island	Bd. of Examiners in Chiropody Dept. of Health	3	0	0	3	GLRI 5-26-2
South Carolina	Bd. of Podiatry Examiners	4	0	0	4	
South Dakota	Bd. of Podiatry Examiners	3	1	0	4	SDCL 36-8-2
Tennessee	Bd. of Registration in Podiatry Dept. of Health and Environment	3	0	0	3	TCA 63-303
Texas	Bd. of Podiatry	6	3	0	9	Pod. Act. 4568
Utah	Utah Podiatry Committee Division of Registration	4	1	0	5	UCA 58-1-6

STATE	NAME OF BOARD & DEPARTMENT	NUMBER OF BOARD MEMBERS PROF.	PUB.	OTHER	TOTAL	CITATION
Vermont	Bd. of Medical Practice Secretary of State	1	2	6[i]	9	
Virginia	Bd. of Medical Examiners	1	0	3[e]		VC 54-282
Washington	St. Podiatry Bd. Dept. of Licensing	4	1	0	5	RCW 18.22.013
West Virginia	WV Bd. of Medicine	2	3	10[d]	15	WVC30-3-5
Wisconsin	Podiatrists Examining Committee Dept. of Regulation	3	1	0	4	WI 15.407
Wyoming	State Bd. of Registration in Podiatry	3	0	0	3	WS 33-133.2
D.C.	Bd. of Podiatry Examiners Dept. of Consumer & Regulatory Affairs	3	0	0	3	
Puerto Rico	Bd. of Examiners of Podiatrists	3	0	0	3	Act 170.2

Souce: HPLIS/CSG; December 31, 1984

KEY:

* One professional member shall be a teacher.
a. A podiatrist shall assist in the preparation of the examination.
b. All other members are physicians.
c. Seven members shall hold the degree of doctor of medicine, one member shall hold the degree of doctor of osteopathy.
d. Eight physicians holding the degree of doctor of medicine, one shall be a physician's assistant and one shall be the director of health *ex officio*.
e. One medical physician from each congressional district, one osteopath, one chiropractor and one clincial psychologist.
f. Board may appoint two podiatrists to set on the board.
g. One is an executive department designee, nine shall possess a MD degree, one shall be an osteopath and one shall be a licensed bio-analytical laboratory director.
h. Member shall be the Director of the Department of Human Services.
i. One Physicians Assistant and five MDs.

TABLE X-3

PODIATRIST
FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	ISSUE LICENSE	APPROVE/ ACCREDIT EDUCATIONAL PROGRAMS	PROMULGATE REGULATIONS
Alabama	Board	APA	Board
Alaska	Board	Board	Board
Arizona	Board	APA	Board
Arkansas	Board	APA	Board
California	Board	APA	Board
Colorado	Board	Board	Board
Connecticut	Department	Board	
Delaware	Board	APA	Board
Florida	Department[a]	APA	Board
Georgia	Board	Board	Board
Hawaii	Board	APA	Board
Idaho	Board	Board[b]	Board
Illinois	Department[a]	Department	Department[a]
Indiana	Board	Board	Board
Iowa	Board	Board	Board
Kansas	Board	Board	Board
Kentucky	Board	APA	Board
Louisiana	Board	Board	Board
Maine	Board	APA	Board
Maryland	Board	Board[b]	Board
Massachusetts	Board	Board	Board
Michigan	Board	Board	Board
Minnesota	Board	Board	Board
Mississippi	Board	Board	Board
Missouri	Board	Board	Board
Montana	Department[a]	Board	Board
Nebraska	Department	Department	Board
Nevada	Board	Board	Board
New Hampshire	Board	APA	Board
New Jersey	Board	Board	Board
New Mexico	Board	Board	Board
New York	Department[a]	Department[a]	Department[a]
North Carolina	Board	APA	Board
North Dakota	Board	Board	Board
Ohio	Board	APA	Board

STATE	ISSUE LICENSE	APPROVE/ ACCREDIT EDUCATIONAL PROGRAMS	PROMULGATE REGULATIONS
Oklahoma	Board	Board	Board
Oregon	Board	Board	Board
Pennsylvania	Board	Board	Board
Rhode Island	Div. of Prof. Regulations	Board	Board
South Carolina	Board	Board	Board
South Dakota	Board	Board	Board
Tennessee	Div. of Health Related Bds.[a]	Board	Board
Texas	Board	Board	Board
Utah	Div. of Regis.[a]	APA	Division[a]
Vermont	Board	Board	Board
Virginia	Board	APA	Board
Washington	Director of Licensing[a]	Board[b]	Board
West Virginia	Board	Board	Board
Wisconsin	Board	Board	Board
Wyoming	Board	APA	Board
D.C.	License & Certification Div.[a]	APA	Board
Puerto Rico	Board	c	Board

Source: HPLIS/CSG; December 31, 1984

KEY:

APA=The American Podiatry Association.
a. Board, Committee or Council advises the Department.
b. Board, Committee or Council recognizes the college if the APA has accredited the college.
c. Schools in Puerto Rico-the Higher Education Council; schools outside Puerto Rico-the Board.

TABLE X-4

PODIATRIST ENFORCEMENT FUNCTIONS OF LICENSING BOARDS AND AGENCIES

STATE	CITATION	SUSP.	REVOKE	RESTR. LIC.	CENS.	REPR.	PROB.	FINE	OTHER
Alabama	AC 34-24-276	x	x						
Alaska	08.64.331	x	x	x	x	x	x		
Arizona	32-852	x	x		x		x		
Arkansas	Rules Act IV	x	x						
California	2227	x	x			x	x		a
Colorado	CRS 12-32-107	x	x				x		
Connecticut	190-17	x	x		x	x	x	Max. $1000	
Delaware	514	x	x		x	x	x		
Florida	461.013	x	x	x		x	x	Max. $1000	
Georgia	43-35-7	x	x						
Hawaii	HRS 463E-6	x	x						
Idaho	54-605	x	x						
Illinois	4922	x	x				x		
Indiana	IC 25-29-2-6.1	x	x	x	x	x	x		
Iowa	470.139-212	x	x				x		
Kansas	65-2006	x	x	x					
Kentucky	KRS 311.480	x	x						
Louisiana	RS 37:624	x	x						
Maine	3655A	x	x	x			x		
Maryland	15-311	x	x			x	x		
Massachusetts	ALM 112 18.20	x	x						
Michigan	3333.16226	x	x	x		x	x	x	
Minnesota	MSA 153.09	x	x						
Mississippi	MCA 73-27-13	x	x						
Missouri	AMS 330,160	x	x						
Montana	37-6-311		x						
Nebraska	RS 71-149	x	x	x	x	x	x		
Nevada	NRS 635.130:140	x	x						
New Hampshire	RSA 315.9	x	x	x		x			b
New Jersey	NF 45:5-8	x	x						
New Mexico	NMSA 61-811	x	x						
New York	CLNYA 6511	x	x	x	x	x	x	x	b,c
North Carolina	90-202.8	x	x	x		x		x	
North Dakota	NDCC 43-05-16		x						
Ohio	4731.61	x	x	x		x	x		

STATE	CITATION	SUSP.	REVOKE	RESTR. LIC.	CENS.	REPR.	PROB.	FINE	OTHER
Oklahoma	59 OS 4.148	x	x						
Oregon	677.860	x	x						
Pennsylvania	63PS42.16	x	x						
Rhode Island	GL.RI 5-29-16	x	x						
South Carolina	40-51-150:160	x	x						
South Dakota	SDCL 20:55:06:01	x	x						
Tennessee	63-319	x	x						a
Texas	Rules 375.12	x	x				x		
Utah	58-1-25	x	x						
Vermont	VSH 54-316	x	x		x	x	x		
Virginia	VC 54-316	x	x		x	x	x		
Washington	RCW18.22.151	x	x						
West Virginia	30-3-14	x	x	x		x			
Wisconsin	15.08	x	x	x		x			
Wyoming	33-133-10		x						
D.C.	2-2207	x	x						
Puerto Rico	Act 170 sect.16	x	x						

Source: HPLIS/CSG; December 31, 1984

KEY:

a. The board can take such action as is necessary.
b. Board can require a course of education or training.
c. Board can require the licensee to perform up to 100 hours of public service.

TABLE X-5

PODIATRIST
EXAMINATION OF APPLICANTS

STATE	WRITTEN EXAM USED	PRACTICAL	ORAL	CITATION
Alabama	a	yes		AC 34-24-255
Alaska	a		yes	AS 08.64.220
Arizona	a	yes	yes	ARS 32-825
Arkansas	a	yes		ASA 72-305
California	a	may	may	
Colorado	a			CRS 12-21-105
Connecticut	a			CGSA 20-55 R 24-5-32
Delaware	b			R Title 24
Florida	x			R 21T-11-02
Georgia	a			OCGA 43-34-4
Hawaii	a	yes	yes	HRS 463E-4
Idaho	a	yes	yes	R section F
Illinois	a	yes	yes	111 IRS 4918
Indiana	a			
Iowa	a		yes	ICA 470-139.1
Kansas	x			KSA 65-2004
Kentucky	a	yes	yes	201 KAR 25:012
Louisiana	a	may	may	RS 37:613
Maine	a		yes	Chap. 1 Sec. 2.3
Maryland	a	yes		ACM10-40.01
Massachusetts	a	may	may	ALM 112 17
Michigan	a	may		R 338.8104
Minnesota	a	may	may	MSA 153.05
Mississippi	a			MSA 73-27-9
Missouri	a	may	may	RSMO 330.040
Montana	a			MCA 37-6-303
Nebraska	a			RS 71-175
Nevada	a	may	may	NRS 635.060
New Hampshire	a			RSA 315:7
New Jersey	a	may	may.	NFSA 45:5-7
New Mexico	a	yes	yes	R II & V
New York	a	yes		R 65.2
North Carolina	a	yes	yes	GSNC 90-202.6
North Dakota	a			NDCC 43-05-12
Ohio	a			ORCA 4731.57
Oklahoma	x	yes	yes	59 OS 4.144
Oregon	x			ORS 677.825
Pennsylvania	a			PCS 63:42.8
Rhode Island	a	yes	yes	GLRI 5-29-5
South Carolina	a	may	may	CLSV 40-51-80

STATE	WRITTEN EXAM USED	PRACTICAL	ORAL	CITATION
South Dakota	a			
Tennessee	b	yes		TCA 63-3111
Texas	x	yes	yes	R 371.7 & 8
Utah	a	yes		UCS 58-5-3
Vermont	a	may	may	VCA 364
Virginia	a	yes	yes	VC 54-298,299,300.1
Washington	a			RCW 18.22.083
West Virginia	b			WVC 30-3-10
Wisconsin	a	yes	yes	WIS Ad.C, Ned 6.05
Wyoming	a	yes		WS 33-133.5
D.C.	x	yes	yes	DCCA 2-2205
Puerto Rico	a	d		Act 170 8

Source: HPLIS/CSG; December 31, 1984

KEY:

x. An exam is given but there is no reference to a specific examination.
a. Test used is the National Board of Podiatry Examiners test.
b. The exam is prepared or approved by the board, including an exam prepared by the National Board of Podiatry Examiners may be used.
c. Credit may be given for experience.

(It should be noted that where the cite is to a law, then it is possible that in the regulation the Board has accepted the NBPE test).

TABLE X-6

PODIATRIST
INITIAL REQUIREMENTS FOR LICENSE APPLICANTS

STATE	CITATION	ED.	INTERN.	MORALS	AGE	CIT.	RES.
Alabama	36-24-235	c		x	19	yes	
Alaska	AS08.64.209	c	1 yr.	a			
Arizona	32-823;826	c	1 yr.	a			
Arkansas	72-304	c		x	21		
California	2486	c	1 yr.	a			
Colorado	12-32-105	c		x	21		
Connecticut	20-54	c(d)					
Delaware	506	c	1 yr.	a,b			
Florida	21T-11.01	c		a	18		
Georgia	43-35-4	c(e)		x	21		
Hawaii	463E-3	c		x			
Idaho	Rules sect. 3	c(e)		x	21		
Illinois	4913	c(j)		b	21	yes	
Indiana	25-29-1-3	c		c,b	18		
Iowa	149.3.4	c(e)					
Kansas	365,2003	c			21		
Kentucky	RS371.420	c		x	18	yes	yes
Louisiana	RS 37:613	c		x	21	yes	
Maine	3651	c(e)			18		
Maryland	315-302	c(e)	1 yr.	x	18		
Massachusetts	112 16	c		x	18		
Michigan	Act 368	c(f)	1 yr.	x	18		
Minnesota	153.04	c		x	18		
Mississippi	73-27-5	c		x	21		
Missouri	330.030	c		x	21		
Montana	37-6-302	c		x			
Nebraska	71175	c					
Nevada	635.050	c		x	21		
New Hampshire	315.2	c		x	18		
New Jersey	45.5-3	c	yes	x	21	yes	
New Mexico	61-8-8	c		x			
New York	7004	c		x	21		
North Carolina	90-202-5	c(e)		x			
North Dakota	43-05-11	c			18		
Ohio	4731.53	c(e)		x	18		
Oklahoma	59-054.144	c		b	21		yes
Oregon	3677.820	c		x	18		
Pennsylvania	342.4	c(g)		h	21	yes	yes
Rhode Island	5-29-2	c(g)	480 hrs.	x	18		
South Carolina	40-5150	c		x	21		

STATE	CITATION	ED.	INTERN.	MORALS	AGE	CIT.	RES.
South Dakota	20.55:01:02	c		x	18		
Tennessee	63-309	c		x	18		
Texas	R 371.3	c		x	21		
Utah	58-5-2	i		x	21		yes
Vermont	7-363	c		x			
Virginia	54-305	c		x	18		
Washington	18.22.040	c(e)		x	18		
West Virginia	WV30-3-10	c	1 yr.	x			
Wisconsin	448d.05	c		b			
Wyoming	33-133.4	c(e)					
D.C.	2-2205	c		x	21	yes	
Puerto Rico	310	c(e)	1 yr.				6 mo.

Source: HPLIS/CSG; December 31, 1984

KEY:

1. An intership is defined as a supervised work experience.
x. Be of good moral character.
a. Not committed any act which would constitute a disciplinary violation.
b. Not be convicted of a felony which would bear directly upon the practice of podiatry.
c. Must be a graduate of a Board or APA approved School of Podiatry.
d. If graduate of podiatry school after July 1, 1971 applicant must have two years of prepodiatry college years; if graduate of podiatry school after July 1, 1951 applicant must have thirty-two weeks of study in a college or scientific school.
e. Two years of college education.
f. Three years toward a degree of an approved college.
g. One year of liberal arts education.
h. Not addicted to the use of drugs or alcohol.
i. Two years in liberal arts or sciences college and 3,120 hours of class work in an APA recognized school of podiatry; or one year in liberal arts or sciences college and 4,160 hours of class work in an APA recognized school of podiatry.
j. Sixty semester hours of college work.

TABLE X-7

PODIATRIST

SCHEDULE OF FEES

STATE	APPLICATION	EXAM	RENEWAL	TEMPORARY	DUPLICATE	RECIPROCAL
Alabama	$50		$50/An			$200
Alaska	$50	$200	$600/4 yrs.	$50		$200
Arizona	$150/$75^{d}		$150/An			$150
Arkansas	$200		$100/An			N/A
California	$120/$270^{d}		$270^{d}/Bi	$15		
Colorado						
Connecticut	$150	$100				$150
Delaware**	(Obtain from Div. of Business & Occ. Reg.)					
Florida	$120^{a}/$60^{d}	$250	$120/Bi			
Georgia	$100		$120^{b}/$60 Bi			$200
Hawaii	$25		$10/Bi			
Idaho	$25		$50/An		$10	$35
Illinois	$25	COE	$35/An		$10	$50
Indiana	$250		$40/Bi		$25	$200
Iowa	$100	$100	$140/Bi		$10	
Kansas	$150	COE	$50/An	$25		$150
Kentucky	$100		$35/An			$150
Louisiana	$50		$25/An			$110
Maine	$100		$100/Bi			$100
Maryland	$50		$25	$15		$50
Massachusetts	$100		$25/An	$50	$10	$125
Michigan	$100		$150/Tri	$100		
Minnesota						
Mississippi			$40/An			
Missouri	$200		$150/An		$10	$200
Montana	$35	$35	$25/An			$50
Nebraska**		$50	$15/An			$100
Nevada**		$100	$50/An			$150
New Hampshire**		$50	$5/An			
New Jersey**		$150	$15/An	$10		$150
New Mexico			$100/Bi			$250
New York**	$150		$40/Bi			$60
North Carolina	$100^{c}	$200	$150/An			$100
North Dakota		$150		$150	$10	$150
Ohio**		$75	$50/Tri			$150

STATE	APPLICATION	EXAM	RENEWAL	TEMPORARY	DUPLICATE	RECIPROCAL
Oklahoma	$200		$25/An	$50	$300	
Oregon**		$100	$30/An			
Pennsylvania	$50		$75/Bi			$100
Rhode Island	$50		$25/An			$50
South Carolina**		$50	$10/An			$50
South Dakota	$200		$10/An			$75
Tennessee	--		$50/An			
Texas	$100		$150/An^d	$25^d	N/A	
Utah	--	$25	$20/Bi			$50
Vermont	$75				$100	$75
Virginia**		$175				$100
Washington	$100	$10	$35/An		$5	$100
West Virginia	$250		$50/Bi			$150
Wisconsin	$50		$35/An	$10	$5	$50
Wyoming	$50		$50/An			$100
D.C.**	$20	$60	$50/An			$80
Puerto Rico	$50		$50/An		$25	$50

Source: HPLIS/CSG; December 31, 1984

KEY:

a. For those licensed during the first year of the biennial $120. Those licensed in the second year will pay $60.
b. Non-residents renewal fee is $120 biennially.
c. Fee is for a temporary certificate for an academic staff member. Renewal is $35 annually.
d. Initial license or registration fee.

* Fees represent the ceiling amount.
** Information taken from a December 1982 document and may not be current.

TABLE X-8

PODIATRIST
RECIPROCITY AND ENDORSEMENT

STATE	TYPE	CONDITIONS	CITATION
Alabama	Reciprocity	c,d,e,n	AC 34-24-271
Alaska	Endorsement	a,b,c,d	AS 08.64.250
Arizona	Endorsement	a,b,c,d,e	ARS 32-825
Arkansas	None		
California	None		
Colorado	Endorsement	b,g	12.32.108
Connecticut	Reciprocity	a,c,f	20-57
Delaware	Reciprocity	a,b,c,e,f	Podiatry Rule 3.3
Florida	None		
Georgia	Reciprocity	c	43-35-6
Hawaii	None		
Idaho	Endorsement	a,b,c,d	Rules & Regs. G
Illinois	Reciprocity	b,c,e,g	Ill. Revs. 4919
Indiana	Endorsement	b,g	25-29-1-3 (f)
Iowa	Reciprocity	e,f,g	R 470-139.2
Kansas	Reciprocity	b,g	KS 65-2003
Kentucky	None		
Louisiana	Endorsement	a,d,g	RS 37-617
Maine	Reciprocity	b,d,g	R Chapter 1 2(B)
Maryland	Reciprocity	b,g	15-305
Massachusetts	Endorsement	e.g	112:16
Michigan	Endorsement	g,h	R 338.8107
Minnesota	Endorsement	b,g	153.13
Mississippi	Reciprocity	g	73-27-5
Missouri	Endorsement	b,g	4 CSR 230-2.050
Montana	Reciprocity	e,g	37-6-302
Nebraska	Reciprocity	b,e,g,i,j	71-139
Nevada	Endorsement	b,g	635.080
New Hampshire	None		
New Jersey	Endorsement	b,e,g	45:5-7
New Mexico	Endorsement	b,d,e,f,g,j	W-8-9
New York	Endorsement	c,e,o	Commissioner's Rule 59.6
North Carolina	Reciprocity	b,c,e,f,g	90-202.7
North Dakota	Reciprocity	e,g	43-05-11
Ohio	Endorsement	c	4731.57
Oklahoma	Endorsement	c,e,k	59:152
Oregon	Endorsement	b,c,g	ORS 677.830
Pennsylvania	Reciprocity	g (Residency)	R 29-72
Rhode Island	Reciprocity	g	5-29-6
South Carolina	Reciprocity	b,e,f,m	40-51-110

STATE	TYPE	CONDITIONS	CITATION
South Dakota	Reciprocity	g	36-8-12
Tennessee	Endorsement	b,d,g	63-314
Texas	Endorsement	1	4570 (g)
Utah	Endorsement	b,d,e	58-5-8
Vermont	Endorsement	b,g	26 369
Virginia	Endorsement	g	54-310
Washington	Reciprocity	d,g	RCW 18.22.081
West Virginia	Endorsement	b,c,d,f,g	30-3-11
Wisconsin	Reciprocity		
Wyoming	Reciprocity	e,g	323-133.11
D.C.	Endorsement	b,e,g	2-2205
Puerto Rico	Reciprocity	g	Act 170 12

Source: HPLIS/CSG; December 31, 1984

KEY:

a. Passed on examination given by the National Bd. of Podiatry Examiners
b. Has a license from another state.
c. Satisfies all other requirements of the state in which a license is sought.
d. Oral and/or practical examination required.
e. Practiced podiatry for a period of six years.
f. Must be of good standing in the state of origination.
g. Requirements of the original state are substantially equivalent to this state.
h. Must pass a Michigan medical jurisprudence test.
i. Must have affidavits attesting the applicant's good character.
j. Passed a written exam equivalent to this states.
k. Will become a resident of this state.
l. State may waive the examination requirement if applicant is certified or licensed in another state.
m. Recommended by his/her state's association.
n. The endorsing certificate must be presented to the Board within six months of issue.
o. The applicant must not have failed a licensing examination used by this state, unless the applicant has subsequently passed the examination.

TABLE X-9

PODIATRIST
CONTINUING EDUCATION REQUIREMENTS

STATE	REQUIRED	CITATION	EXTENT OF EDUCATION
Alabama	yes	34-24-275	12 hrs. Annually
Alaska	Yes, for renewal on or before 1/1/86.	12AAC40.200	17 hrs. Annually
Arizona	yes	R4-25-50	24 hrs. Annually
Arkansas	yes(a)	72-313	to be set by the bd.Annually
California	yes	R 1399.670	50 hrs. Biennially
Colorado	yes	12-21-111	no more than 14 hrs. Annually
Connecticut*	none		
Delaware	yes	Chap.24,R 5.2	32 hrs. Biennially
Florida	yes	R 21T-17	30 hrs. Biennially
Georgia	Bd. may require as a condition of renewal of a revoked license	43-35-7(F)	
Hawaii	yes	463E-S	40 hrs. Biennially
Idaho*	none		
Illinois	yes	4935	25 hrs. Annually
Indiana	yes	844 1AC 8-5-1	12 hrs. Annually
Iowa	yes	470-139.101	30 hrs. Biennially
Kansas	yes	K.S.A. 65-2010	54 hrs. every three years
Kentucky	yes	201 KAR 25:031	12 hrs. Annually
Louisiana*	none		
Maine	yes	R Chapter II 1	25 hrs. Biennially
Maryland	yes	Title 10 subtitle 40 Chapt. 02.03	not to exceed 50 hrs. Biennially
Massachusetts*	yes		15 credits Annually
Michigan	yes	R 338.8301	150 hrs. in a 3 yr. period
Minnesota	yes	R 39.002	12 hrs. Annually
Mississippi*	none		
Missouri	yes	4 CSR 230-2.030	12 hrs. Annually
Montana*	none		
Nebraska	yes	71-174.01	12 hrs. Annually
Nevada	yes	635.115	N/A
New Hampshire	yes	POD 403.01	24 hrs. Biennially
New Jersey	yes(b)		16 hrs. Annually
New Mexico	yes	61-8-10	48 hrs. Biennially
New York	yes	Rule 59	50 hrs. Triennially
North Carolina	yes	390-202.11	not to exceed 25 hrs. a calendar yr.
North Dakota	yes	63-03-02-01	20 hrs. Annually
Ohio	yes	4731.281	150 hrs. triennially

STATE	REQUIRED	CITATION	EXTENT OF EDUCATION
Oklahoma	yes	59 OS 145.1	30 hrs. Annually
Oregon*	none		
Pennsylvania	yes(a)	63 PS 42.9	16 hrs. Biennially
Rhode Island*	none		
South Carolina*	none		
South Dakota*	none		
Tennessee	yes	63-316	not to exceed 15 hrs. Annually
Texas*	none		
Utah	yes	R Chapt. 501	20 hrs. Annually
Vermont*	none		
Virginia*	none		
Washington*	none		
West Virginia*	none		
Wisconsin	yes	Med. Pract. 448.13	30 hrs. Biennially
Wyoming*	none		
D.C.*	none		

Source: HPLIS/CSG; December 31, 1984

KEY:

* Information taken from a November 1984 document and may not be current.
a. May be waived by the board.
b. No statutory requirement but the New Jersey Podiatry Society requires the continuing education in order to renew memberships.

CHAPTER XII

HEALTH PROFESSIONS UNDER STATE SUNSET REVIEW

SUNSET AUDITS OF HEALTH-RELATED OCCUPATIONAL AND PROFESSIONAL LICENSING BOARDS: 1984 and 1985

Introduction

In 1976, Colorado was the first state to pass a sunset law. Formulated in a period when zero-based budgeting and regulatory reform programs were widely adopted in the states, sunset laws focused legislative oversight on state regulatory programs.

In 1984, Massachusetts became the 38th state to adopt a sunset law. Nearly every state has included occupational and professional licensing boards in their sunset review schedules.[1]

The unique aspect of sunset laws is the mandatory termination of boards and agencies by certain dates unless the legislature positively affirms their continued existence by passing new enabling legislation. Regulatory boards are presumed to cease operation unless the sunset evaluation demonstrates the need for their continued existence.

In practice, few boards have been terminated under sunset laws.[2] Instead the sunset evaluation reports and subsequent legislative recommendations have focused on improving the effectiveness and efficiency of regulatory functions.

Under sunset, legislators have scrutinized the regulatory function and asked the hard questions: Is licensure needed to protect the public health? Is the existing administrative structure adequate to carryout the statutorily-delegated functions? Is the practice act of the profession directed towards protecting the consumer's right to quality services and not geared to restrict practice unnecessarily? Is there a strong enforcement process so that errant practitioners are identified and dealt with? Is there a need for continuing competency assessment practices, such as continuing education? If so, have they been adopted? Are there enough resources appropriated to effectively regulate?

In addition, under sunset performance audit reviews, legislators have the opportunity to review the performance of multiple health occupations together. This makes for a more rational review and helps identify common problems and solutions across the professions.

Survey Results

In April, 1985 the Council of State Goverments completed a telephone survey of all the states which have sunset laws, and asked the question "which health professions have been reviewed under sunset in your state in 1984 and 1985."*

*Federal funds were not used for this survey.

Table XII summarizes the responses by state by health profession. The survey produces these findings of sunset during 1984 and 1985.

- Only one board was terminated -- the Tennessee Board of Speech Pathology and Audiology.
- Three boards have been recommended for termination to the legislative sunset review committee -- New Mexico's Nursing Home Administrator Board, Alaska's Nursing Home Administrator Board, which staff have recommended be combined with a medically-related commission, and Hawaii's Hearing Aid Dealer/Fitter Board.
- Alabama and Hawaii each will review 10 health boards for 1985.
- New Mexico will review 12 boards in 1985.
- Florida will review 13 health boards in 1986.
- Oregon and Tennessee each reviewed 12 health boards in 1984; Oregon's reviews are still under committee consideration.
- Georgia will review 5 health boards in 1985 while Delaware and Colorado will each review 4 and 3 boards respectively.
- Utah and Pennsylvania reviewed 5 and 6 health boards respectively in 1984 and are currently reviewing 1

and 4 boards respectively.

- Indiana reviewed all occupational licensing boards in 1979 and has no definite plans for another review cycle. Connecticut will begin its review process for health professional boards again in 1990.
- Kansas and Montana have taken occupational licensing boards out of their review schedules.
- Maryland completed its sunset cycle in 1983 and will begin the cycle again in 1989. In New Hampshire, the boards were reviewed in 1981 and will next be reviewed in 1987.
- Mississippi and Nebraska sunsetted the entire sunset program in 1984. In Illinois the sunset staff were eliminated in legislative budget cutting, and the sunset law may be sunsetted in 1985.
- A number of states did not conduct sunset reviews of health professional boards in 1984 and 1985, including Maine, Nevada, Rhode Island, West Virginia, and Wyoming.
- In South Dakota, sunset review applies to administrative rules only. The Division of Commerce which provides administrative services for many boards will be reviewed in 1985.

Conclusion

States continue to review health-related occupational and professional licensing boards under sunset laws. In the last two years, few recommendations to terminate boards have been made or adopted by the states.

Several states have recently sunsetted their entire sunset law. Two states have removed occupational and professional licensing boards from their sunset review schedules. Five states have completed reviews on all occupational and professional licensing boards and won't review them again until the late 1980's.

FOOTNOTES

1 For a comprehensive listing of boards and agencies schedules for sunset review in the states, see Sunset: A Schedule of State Sunset Reviews, Frances S. Berry et. al, Council of State Governments, Lexington, KY 1983.

2 For a more detailed evaluation of how sunset actually operated in six states, see Sunset: Expectation and Experience, Doug Roederer and Patsy Palmer, Council of State Governments, Lexington, KY 1981.

TABLE XII

HEALTH PROFESSIONS UNDER SUNSET REVIEW

STATES	Acupuncturist	Chiropractor	Clinical Social Worker	Dental Hygienist	Emergency Medical Technician	Hearing Aid Dealer/ Fitter	Midwife	Nurse (RN/LPN)	Nursing Home Administrator	Occupational Therapist	Optician	Optometrist	Osteopath	Pharmacist	Physical Therapist	Physician	Physician's Assistant	Podiatrist	Psychologist	Respiratory Therapist	Sanitarian	Speech Pathologist & Audiologist	Veterinarian
ALABAMA		**				**		**	**			**		**	**	**		**				**	
ALASKA									s,r[1]		*17				s								*
ARIZONA												*											*
COLORADO		*				s		*				*		s	s	*		*					
CONNECTICUT 2																							
DELAWARE						**		s				S				*			s			s	
FLORIDA	t	t				t	*	t	t	*	t	t	t	t	t	t	t	t		*		*	s
GEORGIA									s		s17				s				s		s		
HAWAII	**	**		**		** r		**	**				**	**		**		**					
INDIANA 3																							
KANSAS 4																							
LOUISIANA 5																							
MAINE 6																							
MARYLAND 7																							
MISSISSIPPI 8																							
MONTANA 9																							
NEBRASKA 10																							
NEVADA 11																							

TABLE XII

HEALTH PROFESSIONS UNDER SUNSET REVIEW

TATES	Acupuncturist	Chiropractor	Clinical Social Worker	Dental Hygienist	Emergency Medical Technician	Hearing Aid Dealers Fitters	Midwife	Nurse (RN/LPN)	Nursing Home Administrator	Occupational Therapist	Optician	Optometrist	Osteopath	Pharmacist	Physical Therapist	Physician	Physician's Assistant	Podiatrist	Psychologist	Respiratory Therapist	Sanitarian	Speech Pathologist & Audiologist	Veterinarian
NEW HAMPSHIRE[12]																							
NEW MEXICO		**						**	** r			**	**	**	**	**	**	**	**				**
OKLAHOMA					*														C				
OREGON		c	c			c		c	c			c		c	c	c			c			c	c
PENNSYLVANIA		*						**	**			**	*	*	*	*		*	**				
RHODE ISLAND[13]																							
SOUTH CAROLINA		t						t	**					t		t							t
SOUTH DAKOTA[14]																							
TENNESSEE		*				*		*	*		*17	*	*		*	*		*	*			X	*
TEXAS										C													
UTAH				*		*		*							*				**				*
VERMONT																	c	c					
WASHINGTON														*									
WEST VIRGINIA[15]																							
WYOMING[16]																							

KEY:

* - reviewed in 1984
** - reviewed in 1985
X - terminated

r - staff recommendation to terminate
c - report in committee
s - scheduled to be reviewed in 1985

t - Scheduled to be reviewed in 1986

1 Recommendation to combine with a medically related commission.

2 The next review of health professional boards will be in 1990.

3 Indiana reviewed all occupational licensing boards in 1979.

4 No audits done in 1984 or 1985. Audits are optional at the discretion of the legislative committee.

5 Louisiana reviewed all agencies of the Department of Health and Human resources. A recommendation was made to include the Board of Osteopathy with the Board of Medical Examiners.

6 Maine is in the process of reviewing the Department of Business and Professional Regulation. The individual boards will be looked at in 1986.

7 The Sunset cycle was completed in 1983. It will begin again in 1989.

8 Sunset program nonexistant as of July 1, 1984.

9 In 1983, all licensing boards were removed from sunset review.

10 July 1, 1984 Sunset was technically sunsetted. Out of effect July 2, 1984.

11 No boards reviewed in 1984 or 1985. Nevada is not currently assigning any agencies to be reviewed.

12 All occupational boards were done in 1981. The next review will be in 1987.

13 No licensing boards reviewed in 1984 or 1985.

14 Division of Commerce, which contains many of the regulatory boards, is up for review in 1985. In South Dakota sunset pertains to the rules only.

15 No occupational boards were scheduled for sunset review in 1984 or 1985.

16 Wyoming rarely reviews occupational licensing boards. The Board of Podiatry is the only occupational board that was reviewed; that was done in 1981. No boards are scheduled for the next 2 year cycle.

17 Refers to Dispensing Optician.

The following occupations are not included in this chart as there was no information regarding Sunset review gathered in a telephone survey conducted April 22-26, 1985.

Clinical Laboratory Director
Clinical Laboratory Personnel
Counselors (Marriage, Family and Pastoral)
Dental Assistant
Dental Laboratory Technician
Dentist
Denturist
Hospital Administrator
Hypnotherapist
Medical Technologist
Nurse Praactitioner
Occupational Therapy Assistant
Pharmacist Assistant
Physical Therapist Assistant

CHAPTER XIII

HEALTH PROFESSIONS UNDER STATE SUNRISE REVIEW

Sunrise in the States: The Current Status

During the 1970's state legislatures experienced a significant increase in requests to regulate professions and occupations. More often than not the requests were initiated by the professional group and rarely, if ever, by consumers of the professional service. Few legislators had previous experience with licensing laws or with the objectives of regulation; the health, safety, and welfare of the public. The result was that most occupational groups easily convinced legislators of the need for regulation. Indeed, in many cases the need was clearly justified; but in some instances the need for regulation was not so clearcut.

When requests for regulation arise, legislators are expected to make educated decisions concerning the necessity of regulation within the time-frame of a legislative session. Legislators are concerned with this process as there is not adequate time to thoroughly research the costs and benefits that will accrue to society if the profession becomes regulated and have sought to remove initial licensing requests and research from the legislature.

As a result, nine states have adopted policies whereby requests for licensure can be thoroughly reviewed, the public benefits determined, and a recommendation to the legislature made before the licensure request goes to the legislature. This process of carefully scrutinizing requests for licensure and asking critical questions to determine regulatory need before licensure is granted is commonly referred to as sunrise and has fairly recently been introduced to the credentialing process.

Currently Arizona, Colorado, Hawaii, Kansas, Michigan, Minnesota, Nebraska, Washington and Virginia have active sunrise programs and sunrise bills have been introduced in Vermont and South Carolina. Other states with proposed programs are Tennessee and Florida and the District of Columbia is working on a model sunrise act in order to establish guidelines for professional licensure. Table XIIIprovides information on occupations that have recently undergone a sunrise audit, the action requested by the professional group and what the recommendation was by the review committee to the legislature.

Table XIII

Sunrise: Actions in the States 1984-1985

STATE	Profession	Action Requested by Professional Group	Recommendation Made by Sunrise Audit Committee
KANSAS	Clinical Lab. Professionals	Licensure	Under Consideration
	Dietitian	Licensure	Under Consideration
	Family & Marriage Counselors	Licensure	Under Consideration
	Occupational Therapists	Licensure	Licensure
	Opticians	Licensure	Under Consideration
	Professional Counselors	Licensure	Under Consideration
	Psychologists (Masters level)	Licensure	Registration
	Respiratory Therapists	Licensure	Licensure
MINNESOTA	Acupuncturists	Autonomous Bd. Status	Under Consideration
	Chem. Depen. Practitioners	Licensure	Under Consideration
	Contact Lens Technicians	Licensure	Under Consideration
	Marriage & Fam. Therapists	Licensure	Under Consideration
	Naturopaths	Licensure	Under Consideration
	Opticians	Licensure	Under Consideration
	Personnel & Guidance Counselors	Licensure	Under Consideration
	Phys. Assts.	Registration	Approved Registration
	Social Workers	Licensure	Under Consideration

STATE	Profession	Action Requested by Professional Group	Recommendation Made by Sunrise Audit Committee
MINNESOTA	Veterinary Assts.	Licensure	Under Consideration
VIRGINIA	Athletic Trainers	Licensure	No Need to License
	Corrective Therapists	Professional Recog. Statewide	To be Considered
	Occupational Therapists	Certification	No Certification
	Radiologic Technologists	Currently Making Application	
	Respiratory Therapists	Certification	Certification
	Sanitarians	Re-regulation	Under Consideration
WASHINGTON	Acupuncturists	Certification	Under Consideration
	Dental Hygen.	Independent Practice	Independent Practice for Bachelors Level, Law Remains as is for 2-Year Level.
	Dentist	Add one Dental Hygienist to Dental Exam. Bd.	Under Consideration
	Denturists	Licensure & Independent Practice	Under Consideration
	Dietitians	Licensure	No need to License
	Marriage Counselor	Certification	Certification
	Mental Health Counselor	Certification	Certification
	Naturopaths	Expanded Scope-of-Prac.	Under Consideration
	Physical Therapists	Independent Practice	To be Considered
	Physical Therapists Assts.	Licensure	Under Consideration

STATE	Profession	Action Requested by Professional Group	Recommendation Made by Sunrise Audit Committee
WASHINGTON	Radiologic Technologists	Certification	Under Consideration
	Social Workers	Certification	Certification
	Surgeons Assts.	Licensure	Under Consideration

NATIONAL ORGANIZATIONS WITH HEALTH PERSONNEL INFORMATION

American Hospital Association
840 N. Lakeshore Drive
Chicago, IL 60611
Contact: Barbara Bloom-Krenl, Director
Human Resources
(312) 274-2467

American Medical Association
535 N. Dearborn
Chicago, IL 60610
Contact: State Legislation Dept.
(312) 751-6000

Intergovernmental Health Policy Project
The George Washington University
2100 Pennsylvania Avenue, NW
Suite 616
Washington, DC 20037
Contact: Richard Merritt, Director
(202) 872-1445

National Clearinghouse on Licensure, Enforcement and Regulation
P.O. Box 11910
Iron Works Pike
Lexington, KY 40578
Contact: Fran Berry, Director
(606) 252-2291

National Commission for Health Certifying Agencies
1101 30th Street, NW, Suite 108
Washington, DC 20007
Contact: Janet Ciuccio, Assistant Director
(202) 333-9300

CHAPTER XIV

RESOURCES

ACUPUNCTURE

Acupuncture International Association
2330 S. Brentwood Blvd.
St. Louis, MO 63144

American Association for Acupuncture
American City Bldg.
Suite 108
Columbia, MD 21044
(301) 596-6006

CHIROPRACTOR

American Chiropractic Association
1916 Wilson Blvd. Suite 300
Arlington, VA 22201
(703) 276-8800

International Chiropractic Association
1901 L Street, NW, Suite 800
Washington, D.C. 20036
(202) 659-6476

Federation of Chiropractic Licensing Boards
501 East California Ave.
Glendale, CA 91206
(818) 244-2340

National Board of Chiropractic Examiners
1610 29th Avenue Place
Greeley, CO 80631
(303) 356-9100

LICENSED PRACTICAL NURSE

National Federation of Licensed Practical Nurses
P.O. Box 11038, 214 South Driver Street
Durham, NC 27703
(919) 596-9609

National Council of State Boards of Nursing
625 N. Michigan Ave. Suite 1544
Chicago, IL 60611
(312) 787-6555

REGISTERED NURSES

American Nurses Association
2420 Pershing Road
Kansas City, MO 64108
(816) 474-5720

NURSE-MIDWIFE

American College of Nurse-Midwives
1522 K-Street, NW, Suite 1120
Washington, D.C. 20005
(202) 347-5445

OCCUPATIONAL THERAPIST

American Occupational Therapy Association
1383 Piccard Drive, Suite 300
Rockville, MD 20850
(301) 948-9626

PHYSICAL THERAPIST

National Association of Physical Therapy
P.O. Box 367
West Covina, CA 91793
(213) 919-8088

American Physical Therapy Association
1111 North Fairfax Street
Alexandria, VA 22314
(703) 684-2782

PODIATRIST

American Podiatric Medical Association
20 Chevy Chase Circle, NW
Washington, D.C. 20015
(202) 537-4900

Federation of Podiatry Boards
Suite 745
5530 Wisconsin Ave. NW
Washington, D.C. 20815
(301) 656-2214

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The
Council of
State
Governments
CSG

STATE CREDENTIALING
OF THE BEHAVIORAL SCIENCE PROFESSIONS:
COUNSELORS, PSYCHOLOGISTS AND SOCIAL WORKERS

FINAL REPORT

Prepared by

The National Clearinghouse on Licensure,
Enforcement and Regulation and

The Council of State Governments
P.O. Box 11910
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PREFACE

States regulate over fifty health occupations and professions. Each state legislature determines which health occupations and professions the state will regulate, the type of credential, the scope of practice of the profession, and the administrative and policymaking structures which will carry out the ongoing regulatory functions.

The Council of State Governments has published a series of research reports beginning in 1952 with Occupational Licensing in the States, designed to provide policymakers with comparative state information on state occupational and professional regulation issues. In 1984 the Council of State Governments and the National Clearinghouse on Licensure, Enforcement and Regulation (CLEAR) were awarded a three-year project on Analysis and Exchange of Information and Data on State Credentialing of Health Personnel, by the Bureau of Health Professions, Health Resources and Services Administration, Public Health Service, U.S. Department of Health and Human Services. Under this project, the state statutes and administrative regulations pertaining to some 41 health occupations and professions have been collected. Using these laws, staff have compiled detailed tables on the nature of state credentialing, including the structures, state credentialing requirements, and interstate reciprocal agreements for twelve health occupations and professions during the project's first year. Each of the succeeding two years, an additional ten to twelve health occupations and professions will be selected for in-depth comparative state study.

This report -- State Credentialing of the Behavioral Science Professions: Counselors, Psychologists and Social Workers -- is one of two reports produced during the project's first year. Special thanks for their expert advice and oversight during the project's first year are due to the Health Professions Licensure Informaton System Advisory Committee members: Dr. Joseph Hamburg, Professor, University of Kentucky Medical School; Helen Herring, LCSW, Partner, Herring, Reeb and Associates; Barbara Nichols, Secretary, Wisconsin Department of Regulation and Licensing; Dr. Benjamin Shimberg, Senior Research Scientist, Educational Testing Service; Rep. Sara Townsend, Majority Whip, New Hampshire House of Representatives; and William L. Wood, Jr., Attorney-at-Law, Scarsdale, New York.

The Project Director has been Frances Stokes Berry, the Council of State Governments' Director of The Center for Health and Regulation and Executive Director of CLEAR. Ed Bowling, Mark Ford, Ellen Hume and Dorrie Mazzone have served as research assistants for the project. Blessing Brown has been the project's secretary and meeting coordinator. Pat Bancroft, Wanda Hines, and Joy Pettit have ably assisted in typing the project's reports.

The Project Officer has been B. Jerald McClendon, Bureau of Health Professions, HRSA, U.S. Department of Health and Human Services.

Thanks are also extended to the people and organizations who reviewed the report's first draft and made comments on its substance and fact. Any remaining errors, however, are the full responsibility of the report's authors. The reviewers include: Frank Burtnett, Asst. Exec. Dir. for Association and Professional Relations, American Association for Counseling and Development; Donna Daley, Administrative Associate, American Psychological Association; David Jeffreys, Exec. Dir., American Association of State Social

Work Boards; and Miles Johnson, Senior Staff Associate, Department of Professional Services, National Associaton of Social Workers.

The Council of State Governments and CLEAR gratefully acknowledge Health Resources and Services Administration's support under contract #240-84-0094, without which this project could not have been undertaken.

The National Clearinghouse on Licensure, Enforcement and Regulation (CLEAR) is an organization composed of state officials and administrators involved with occupational licensing and regulation issues. CLEAR was formed in 1980 to facilitate communication on matters of common concern among licensing board members and administrators, central agency administrators, and others in the occupational regulation community. CLEAR maintains a substantial collection of articles, reports, state statutes and regulations, and comparative state studies regarding licensing issues, including reports compiled and published by the CLEAR staff. CLEAR enjoys a cooperative arrangement with The Council of State Governments which provides staff support services and houses CLEAR's information resource collection.

A diverse group of officials forms CLEAR's Steering Committee which oversees the organization's activities. The committee includes representatives from central licensure agencies, licensure board members and administrators, consumer affairs agencies, data systems departments, state legislatures, legislative service agencies, attorneys general offices, and sunset commissions.

Other CLEAR activities and projects include:

- The National Disciplinary Information System (NDIS) - a computerized data base of final disciplinary actions taken by professional licensing boards;
- The National Certified Investigator Training (NCIT) - a 21-hour training and certification program in investigative procedures and techniques;
- National Clearinghouse for Examination Information -- which publishes a quarterly newsletter on examination issues; and
- Other training manuals and conferences for the professional regulation community.

The Council of State Governments is a nonprofit organization, established, supported, and directed by the states. It conducts research on state programs and problems; maintains an information service available to state officials and legislators; issues a variety of publications; assists in state-federal liaison; promotes regional and state-local cooperation; and provides staff for affiliated organizations.

Carl Stenberg
Executive Director
Council of State Governments

Wellington Webb
Executive Director
Colorado Department of Regulatory Affairs
Chairman, CLEAR

CHAPTER ONE

INTRODUCTION

I. A. Background

State regulation of those health professions broadly termed the "behavioral sciences" -- psychology, social work, counseling, marriage and family therapy -- is a relatively recent phenomenon. While physician licensure began in the 1850's, state regulation of the behavioral sciences took place after World War II.

According to the American Heritage Dictionary, Behavior is defined as "1. The manner in which one behaves; deportment; demeanor. 2. The actions or reactions of persons or things under specified circumstances." The behavioral sciences, then, are the scientific study of persons' behaviors as the people exist in their environments.

Each of the health professions which together constitute the behavioral sciences (i.e. counseling, psychology, social work, and marriage and family therapy) is a distinct field of study and application; however, there is a range of regulatory and policy issues which affect all of these professions. This study will examine both the broader issues pertinent to all the professions as well as examine each profession's regulatory structure and policy in depth.

The behavioral science professions represent a microcosm of legislative and policy issues in the broader field of occupational and professional regulation. There is widespread concern among both the general public and legislators about the abuses that can happen in counseling. Newspaper investigatory series as well as consumer organizations such as Stop Abuse By Counselors in Seattle, Washington, are documenting cases where both licensed and unlicensed practitioners sexually and/or psychologically abuse their patients. Such evidence leads to calls for additional and stricter state regulation; however, during the past decade, many legislators have become more wary of automatically enacting new licensing laws. While licensing is appropriate in some cases, there can be negative impacts from licensure, and so a range of alternatives is more likely to be considered.

Several pitfalls of occupational regulation are now recognized. Licensure laws frequently place restrictions on advertising and on various business structures and practices. By restricting the number of people entering a profession and the ability of new professions to work independently, licensure may increase the cost to consumers of some professional services. The mobility of practitioners has been hampered, and in many fields auxiliaries have been underused. Licensure often focuses on testing applicants for the initial license and is less concerned about the competence and performance of practitioners after the license is granted.

One of the characteristics of the counseling field is the existence of many varieties of treatment modalities and many unregulated specialty groups. Because of this plurality, it can be especially confusing for legislators to evaluate which treatment modalities should be regulated and to sort out the overlapping scope-of-practice jurisdictions of some of the counseling occupations.

I. B. Type of State Credentialing

State regulation of health occupations and professions takes three forms: licensure, certification and registration. The three types of state credentialing provide different levels of restrictions on entry into the occupation or profession, with licensure being the most restrictive form of state credentialing and registration the least restrictive. Specifically, licensure restricts the scope-of-practice so that it is illegal for a non-licensed person to perform the covered services. Through licensure laws, states specify the minimum educational and training requirements needed by applicants, administer an exam, issue and renew licenses, and establish enforcement procedures to discipline incompetent or fraudulent practitioners.

Certification generally refers to a credential issued by a non-government agency or association which recognizes the individual's achievements of predetermined competence and standards. States also adopt "statutory certification," which limits use of particular titles to persons meeting predetermined requirements and for the purpose of this report, "certification" is "statutory certification."

Registration is the least restrictive form of state regulation. It can be as simple as requiring a person to provide his name, address and training to a state agency, or registration can require individuals to first meet minimum practice standards before registering and using the title of registered practitioner.

I. C. Major Issues

The major policy issues pertaining to the behavioral science professions in nearly every case neatly parallel the key issues in occupational licensing at large; however, two issues -- mandated benefits and third-party reimbursement -- are particularly acute concerns to this group of professions. Three issues will be briefly developed below, including: incompetent practitioners, deciding when to regulate, and mandated benefits.

I. C. 1. Incompetent Practitioners: At the state and federal level, incompetent practitioners -- how to find them and how to deal with them -- has emerged as a number one priority for state legislators and regulators for both regulated and unregulated professions. Legislatures are providing increased funding for strengthening enforcement activities against licensed practitioners.

Practice acts are being amended to expand the disciplinary sanctions available to regulators beyond suspension and revocation. The most frequent additional sanctions include administrative fines, reprimand and probation.

State licensing boards are increasingly developing policies on dealing with practitioners who abuse drugs or alcohol, referring abusers to treatment programs for rehabilitation when possible, and tracking practitioners' successes and failures after treatment.

In May 1984, Senator John Heinz introduced the Medicare and Medicaid Patient and Program Protection Act in the Senate which would give the U.S. Department of Health and Human Services greater powers to exclude fraudulent and incompetent health practitioners from Medicare and Medicaid. This bill would require state licensing boards to report all disciplinary actions taken to the Department to assist in identifying incompetent practitioners. As of April 1986, a House bill has passed and a similar bill is under consideration by the Senate and is expected to pass.

I. C. 2. Deciding When to Regulate: One of the most difficult licensing decisions facing state legislators today is deciding when an occupation should be regulated by the state. In A Proposal for Credentialing Health Manpower, six criteria were suggested for determining whether a health occupational group should be regulated. According to the report, a health occupational group should be regulated if:

a. the unregulated practice of an occupation will harm or endanger the health, safety and welfare of the public, and the potential for harm is recognizable and not remote or dependent on tenuous arguments:

b. the practice of an occupation requires a high degree of skill, knowlege and training, and the public requires assurance of initial skill and continuing occupational competence;

c. the functions and responsibilites of the practitioner require independent judgment and the members of the occupational group practice independently;

d. the scope-of-practice of an occupation is distinguishable from other licensed and unlicensed occupations;

e. the economic impact on the public of regulating this occupational group is justified; and

f. there are no adequate alternatives to regulation (i.e., statutory certification or registration) that will protect the public.

Over the last decade, many states informally developed criteria for deciding when to regulate an occupation, and since 1980, states have begun to formally adopt these criteria in what are known as "sunrise" programs.

By 1984, six states had adopted sunrise programs. Although the processes differ, the purpose is the same: to review and analyze requests from occupations for new forms of state regulation. After requests are reviewed, typically by a committee of health professionals, state regulators and consumers, a recommendation on each request is made on whether regulation is needed and at what level. At least six states are currently considering sunrise legislation. (See Table A-1 for more information on sunrise actions taken during 1985 affecting the behavioral science professions.)